PAGE 1 / 13

Image# 14960020311

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Com	_	'		Office Use Only
NAME OF COMMITTEE (in	TYPE OR PRI	•	ample: If typinger the lines.	g, type	12FE4M5	
SCHLESINGE	R FOR CONGRES	SS				
ADDRESS (number ar	and street)	HAM DRIVE				
Check if did than previous reported. (A	usly TALLAHAS	SEE			FL [32308
2. FEC IDENTIFIC	CATION NUMBER ▼	CITY A		(STATE A	ZIP CODE
C C0054436	61	3. IS THIS REPORT	X NEW (N)	OR	AMEND (A)	STATE ▼ DISTRICT FL 18
(a) Quarterly R April 15	5 Quarterly Report (Q1)	(b) 12-Day PRE	-Election Repo Primary (12P) Convention (1		General (1	
Octobe	Quarterly Report (Q2) r 15 Quarterly Report (Q3)	Election on	M M /	D D /	Y	in the State of
× January	/ 31 Year-End Report (YE)	(c) 30-Day POS	T -Election Rep	ort for the:		
			General (30G)		Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y Y 2013	through	M M 12	/ 31 /	2013
I certify that I have e	examined this Report and	to the best of my kn	owledge and b	pelief it is tru	ue, correct and	l complete.
Type or Print Name	of Treasurer Abby F Dup	oree				
Signature of Treasure	er Abby F Dupree		[Electronically F	<u>"iled]</u> D	pate 01	09 / Y Y Y Y Y 2014
	false, erroneous, or incomp	olete information may	subject the pers	son signing t	his Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

2013

of Receipts and Disbursements FEC Form 3 (Revised 02/2003)

10

01

PAGE 2 / 13

2013

12

31

Write or Type Committee Name

SCHLESINGER FOR CONGRESS

Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 4700.00 19652.30 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 4700.00 19652.30 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 14702.28 42244.61 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 14702.28 42244.61 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 27407.69 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 50000.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts PAGE 3 / 13 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

SCHLESINGER FOR CONGRESS

10 01 2013 12 31 2013 Report Covering the Period: From: To:

I. RECEIPTS		I. RECEIPTS COLUMN A Total This Period	
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	3850.00	18450.00
	(i) Itemized (use Schedule A)	850.00	1202.30
	(iii) TOTAL of contributions from individuals	4700.00	19652.30
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	4700.00	19652.30
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	50000.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	50000.00
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
ŝ.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	4700.00	69652.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 13

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	14702.28	42244.61		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00		
19.	LOAN REPAYMENTS:				
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00		
	(b) Of All Other Loans	0.00	0.00		
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00		
20.	REFUNDS OF CONTRIBUTIONS TO:				
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
		0.00	0.00		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
	(such as PACs)	0.00	0.00		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00		
21.	OTHER DISBURSEMENTS	0.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	14702.28	42244.61		
	III. CASH SI	JMMARY			
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	37409.97		
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	4700.00		
25.	SUBTOTAL (add Line 23 and Line 24)		42109.97		
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	14702.28		
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	IG PERIOD	27407.69		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) 11a 11b

for each category of the 11d 11c Detailed Summary Page 12 13a 13b 14

5 OF 13

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS Full Name (Last, First, Middle Initial) **Christopher Healey** Date of Receipt Mailing Address 10 Rachael Dr 2013 13 City State Zip Code Transaction ID: SA11AI.4227 CT 06424 East Hampton FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Self Employed Political Consultant Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) John W McCutchen Date of Receipt Mailing Address 4885 Gabriella Ln 21 2013 11 City State Zip Code Transaction ID: SA11AI.4231 Oviedo FL 32765 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Physician Jewett Ortho Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Scott Podnos Date of Receipt Mailing Address 1905 Clintmoore Rd 2013 12 27 City State Zip Code Transaction ID: SA11AI.4225 FL Boca Raton 33496 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Advanced Dermatology Dermatologist Receipt For: 2014 Election Cycle-to-Date Y Primary General Other (specify) 250.00 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	:	ь	OF		13	
(check only one)										
X	11a	1	1b		11c		11	d		
	12	1	3a		13b		14			15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS Full Name (Last, First, Middle Initial) Joseph P Rigoglioso Date of Receipt Mailing Address 163 Inwood Rd 2013 31 City State Zip Code Transaction ID: SA11AI.4235 CT 06825 Fairfield FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2600.00 Name of Employer Occupation Self Employed Attorney Receipt For: 2014 Election Cycle-to-Date Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) Oscar Torres Date of Receipt Mailing Address 3190 SE Dominica Terrace 10 2013 City State Zip Code Transaction ID: SA11AI.4221 Stuart FL 34995 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Electrician Torres Electrical Supply Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 3100.00 SUBTOTAL of Receipts This Page (optional)..... 3850.00 TOTAL This Period (last page this line number only).....

7 13 FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) for each category of the X 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Carroll and Company CPA's 2013 Mailing Address 2640-A Mitcham Drive 10 31 City State Zip Code Amount of Each Disbursement this Period FΙ Tallahassee 32308 253.22 Purpose of Disbursement Accounting Services & Postage Transaction ID: SB17.4203 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Carroll and Company CPA's Date of Disbursement Mailing Address 2640-A Mitcham Drive 10 31 2013 City State Zip Code Amount of Each Disbursement this Period FL 32308 Tallahassee 475.00 Purpose of Disbursement **Accounting Services** Transaction ID: SB17.4204 Candidate Name Category/ Type Disbursement For: Office Sought: House 2014 Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Sameer Chagani Mailing Address 2046 Maplewood Drive 18 2013 City State Zip Code Amount of Each Disbursement this Period **Coral Springs** FL 33071 Purpose of Disbursement 1250.00 Management Consulting Transaction ID: SB17.4213 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify) State: District: 1978.22 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

			Detailed Summar	y Page		20a	20b	20c	21
	ny information copied from such Reports for commercial purposes, other than us								
\rangle	NAME OF COMMITTEE (In Full) SCHLESINGER FOR CON								
۹.	Full Name (Last, First, Middle Initial) Sameer Chagani Mailing Address 2046 Maplewood Drive				Date		arsement /	2013	Y
	City Coral Springs Purpose of Disbursement Management Consulting Candidate Name	State FL	Zip Code 33071	Category/ Type		. ,	ch Disburse	1250.0	-
	Office Sought: Senate President State: District:	Disbursement For: Primary Other (sp	General	,,,,,					
3.	Full Name (Last, First, Middle Initial) Cutting Edge Mailing Address 1826 SW Renfro Stree	t					irsement	y y y 2013	Y
	City Port St Lucie Purpose of Disbursement Printing Candidate Name Office Sought: House Senate	State FL Disbursement For: Primary Other (sp	General	Category/ Type	ı C		ch Disburse	ement this P 445.	-
Э.	State: President District: Full Name (Last, First, Middle Initial) Direct Mail Systems		Эеспу <u>)</u>		Date	of Disbu	D D /	Y Y Y	ď
	Mailing Address 12450 Automobile Blvd City Clearwater Purpose of Disbursement Direct Mail and Postage Candidate Name Office Sought: House Senate President State: District:	State Zip	General	Category/ Type		unt of Ea	o2 ch Disburse	2013 ement this P 6614.	-
s	SUBTOTAL of Disbursements This Page	(optional)					,	8310.	15

TOTAL This Period (last page this line number only).....

		·		20a	20b	20c	21
	y information copied from such Reports and Statements may not be sold or u for commercial purposes, other than using the name and address of any polit						
\rangle	NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS						
۹.	Full Name (Last, First, Middle Initial) eDonation Mailing Address 117 N Saint Asaph St City State Zip Code	Date of Disbursement 10 02 2013 Amount of Each Disbursement this Period					
	Alexandria Purpose of Disbursement Service Charge Candidate Name Office Sought: House Senate Disbursement For: 2014 Reneral	Category/ Type	Transa	action ID :	SB17.421	67. <i>′</i>	17
3.	State: District: Full Name (Last, First, Middle Initial) eDonation Mailing Address 117 N Saint Asaph St		Date of Disbursement M M M / D D / Y M M M M M M M M M M M M M M M M M M				Y
	City State Zip Code Alexandria VA 22314 Purpose of Disbursement Service Charge Candidate Name Office Sought: House Senate President State: District: General Other (specify)	Category/ Type	il C		ch Disburse	ement this P	-
Э.	Full Name (Last, First, Middle Initial) eDonation Mailing Address 117 N Saint Asaph St		М	e of Disbu		2013	Υ
	City State Zip Code Alexandria VA 22314 Purpose of Disbursement Service Charge Candidate Name Office Sought: House Senate President President State Zip Code VA 22314 Disbursement For: 2014 Primary General Other (specify)	Category/ Type	i C		SB17.4218	ement this P	-
9	State: District: UBTOTAL of Disbursements This Page (optional)		<u> </u>			210.9	91
	OTAL This Period (last page this line number only)		Ē				

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:

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PAGE 10 OF 13

(check only one)

17
20a
20b
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21

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	y information copied from such Reports and Statements may not be sold or u for commercial purposes, other than using the name and address of any politic		son for the purpose of soliciting contributions			
\rangle	NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS					
۸.	Full Name (Last, First, Middle Initial) eDonation Mailing Address 117 N Saint Asaph St		Date of Disbursement 12 03 2013			
	City State Zip Code	Amount of Each Disbursement this Period				
	Alexandria VA 22314		Amount of Each Dispursement this Feriod			
	Purpose of Disbursement Service Charge		71.95 Transaction ID : SB17.4219			
	Candidate Name	Category/ Type				
	Office Sought: House Senate President Disbursement For: 2014 Primary Other (specify)					
	State: District: Full Name (Last, First, Middle Initial)					
3.	eDonation		Date of Disbursement			
	Mailing Address 117 N Saint Asaph St		12 03 7 7 7 7 7 1			
	City State Zip Code		Amount of Each Disbursement this Period			
	Alexandria VA 22314		74.05			
	Purpose of Disbursement Service Charge Candidate Name		71.95 Transaction ID : SB17.4220			
	Candidate Name	Category/ Type				
	Office Sought: House Senate President State: Disbursement For: 2014 Primary Other (specify)					
	Full Name (Last, First, Middle Initial)					
Э.	Southern Campaign Resources		Date of Disbursement			
	Mailing Address 235 E Virgina St	10 31 2013				
	City State Zip Code		Amount of Each Disbursement this Period			
	Tallahassee FL 32301 Purpose of Disbursement		2000.00			
	Management Consulting Candidate Name	Transaction ID : SB17.4207				
		Category/ Type				
	Office Sought: House Disbursement For: 2014 Primary General Other (specify)					
s	UBTOTAL of Disbursements This Page (optional)		2143.90			
Т	OTAL This Period (last page this line number only)					

PAGE 11 13 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Southern Campaign Resources 2013 Mailing Address 235 E Virgina St 26 Zip Code City State Amount of Each Disbursement this Period FΙ Tallahassee 32301 Purpose of Disbursement 2000.00 Management Consulting Transaction ID: SB17.4209 Candidate Name Category/ Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Disbursement For: Office Sought: House Senate **Primary** General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 2000.00 SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s)

FOR LINE NUMBER: (check only one)

PAGE

12 OF 13

for each category of the **X** 13a Detailed Summary Page 13b Transaction ID: SC/10.4115 NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary ALAN SCHLESINGER General Mailing Address Other (specify) \blacktriangledown 2640A MITCHAM DRIVE State ZIP Code City FL 32308 **TALLAHASSEE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M06^M 05 2013 0.00 ňone % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

13 OF

X 13a

13

(check only one) Detailed Summary Page 13b Transaction ID: SC/10.4187 NAME OF COMMITTEE (In Full) SCHLESINGER FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary ALAN SCHLESINGER General Mailing Address Other (specify) \blacktriangledown 2640A MITCHAM DRIVE State ZIP Code City FL 32308 **TALLAHASSEE** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M 20 2013 0.00 ňone % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) 50000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.