

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

SECRETARY OF THE SENATE

04 JUL 15 PM 3:42

Office Use Only

1. NAME OF COMMITTEE (in full)		USE FEC MAILING LABEL OR TYPE OR PRINT ▼	Example: If typing, type over the lines.	
Daniel Webster for U.S. Senate				
610 S. Boulevard				
ADDRESS (number and street)				
☐ Check if different than previously reported. (ACC)	Tampa	FL	33606	
2. FEC IDENTIFICATION NUMBER		CITY ▲	STATE ▲	ZIP CODE ▲
☐ C00390120				
3. IS THIS REPORT		☒ NEW (N)	OR	☐ AMENDED (A)
				STATE ▼ DISTRICT
				FL
4. TYPE OF REPORT (Choose One)				
(a) Quarterly Reports:				
☐ April 15 Quarterly Report (Q1)	☐ Primary (12P)	☐ General (12G)	☐ Runoff (12R)	
☒ July 15 Quarterly Report (Q2)	☐ Convention (12C)	☐ Special (12S)		
☐ October 15 Quarterly Report (Q3)	Election on		in the State of	
☐ January 31 Year-End Report (YE)	(b) 30-Day Post- Election Report for the:			
☐ July 31 Mid-Year Report (Non-election Year Only) (MY)	☐ General (30G)	☐ Runoff (30R)	☐ Special (30S)	
☐ Termination Report (TER)	Election on		in the State of	
5. Covering Period				
04 / 01 / 2004 through 06 / 30 / 2004				

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy H. Watkins

Signature of Treasurer

Nancy H. Watkins

Date

07 / 12 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Daniel Webster for U.S. Senate

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2004

To:

MM / DD / YYYY
06 / 30 / 2004

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	14846.00	797385.18
(b) Total Contribution Refunds (from Line 20(d))	90100.00	90922.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	-75254.00	706463.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	146517.26	656933.74
(b) Total Offsets to Operating Expenditures (from Line 14)	247.66	388.05
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	146269.60	656545.69
8. Cash on Hand at Close of Reporting Period (from Line 27)	49917.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Daniel Webster for U.S. Senate

Report Covering the Period:

From:

04

01

2004

To:

06

30

2004

I. RECEIPTS**COLUMN A**
This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)

12120.00

(ii) Unitemized

2726.00

(iii) TOTAL of contributions
from Individuals

14846.00

769385.18

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

28000.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(i), (b), (c), and (d))

14846.00

797385.18

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

0.00

0.00

13. LOANS:(a) Made or Guaranteed by the
Candidate

0.00

0.00

(b) All Other Loans

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))

0.00

0.00

**14. OFFSETS TO OPERATING
EXPENDITURES**
(Refunds, Rebates, etc.)

247.66

388.05

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

**16. TOTAL RECEIPTS (add Lines
11(a), 12, 13(c), 14, and 15)**

(Carry Total to Line 24, page 4)

15093.66

797773.23

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	146517.26	656933.74
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 (such as PACs)	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	88100.00	88922.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2000.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	90100.00	90922.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	236617.26	747855.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	271441.09
24. TOTAL RECEIPTS THIS PERIOD (from Line 18, page 3)	15093.66
25. SUBTOTAL (add Line 23 and Line 24)	286534.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	236617.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	49917.49

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1 OF 8

☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 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)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Brian H. Bibeau

Mailing Address

123 S. Calhoun Street

City

Tallahassee

State

FL

Zip Code

32301

FEC ID number of contributing
federal political committee.☒ C

Name of Employer

Hopping Green & Sams

Occupation

attorney

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

500.00

Date of Receipt

04 / 13 / 2004

Transaction ID: C002a101

Amount of Each Receipt this Period

500.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

B. Edward W. Blakely

Mailing Address

954 Maple Lane

City

Jacksonville

State

FL

Zip Code

32207

FEC ID number of contributing
federal political committee.☒ C

Name of Employer

Tidewater Consulting, Inc.

Occupation

govt. relations

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

1000.00

Date of Receipt

04 / 01 / 2004

Transaction ID: C002a01

Amount of Each Receipt this Period

1000.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

C. Judson A. Cauthen

Mailing Address

10816 Memory Lane

City

Tavares

State

FL

Zip Code

32778

FEC ID number of contributing
federal political committee.☒ C

Name of Employer

self-employed

Occupation

real estate

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

270.00

Date of Receipt

04 / 08 / 2004

Transaction ID: C00FL03

Amount of Each Receipt this Period

100.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 2 OF 8

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Judson A. Cauthen

Mailing Address

10916 Memory Lane

City

Tavares

State

FL

Zip Code

32778

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employedOccupation
real estate

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

04 / 08 / 2004

Transaction ID: C00FL04

Amount of Each Receipt this Period

20.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1

Full Name (Last, First, Middle Initial)

B. Richard E. Coates

Mailing Address

11134 Pennewaw Trace

City

Tallahassee

State

FL

Zip Code

32317

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employedOccupation
attorney

Receipt For:

☐ Primary ☒ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

04 / 01 / 2004

Transaction ID: C00ZU01

Amount of Each Receipt this Period

1000.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1

Full Name (Last, First, Middle Initial)

C. Nancy S. DeMoss

Mailing Address

185 Woodbridge Road

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arthur S. DeMoss FoundationOccupation
chairman

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

04 / 09 / 2004

Transaction ID: C00WO02

Amount of Each Receipt this Period

500.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1

SUBTOTAL of Receipts This Page (optional)

1520.00

TOTAL This Period (last page this line number only)

3120.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 3 OF 8

☒ 11a	☐ 11b	☐ 11c	☐ 11d
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☐ 15			

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Kenneth W. Detzner

Mailing Address

1317 Woodgate Way

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employedOccupation
lobbyist

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2004

Transaction ID: C00DaQ01

Amount of Each Receipt this Period

250.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

Full Name (Last, First, Middle Initial)

B. Pamela A. Dingess

Mailing Address

P. O. Box 487

City

Winter Park

State

FL

Zip Code

32790

FEC ID number of contributing
federal political committee.

C

Name of Employer
self-employedOccupation
investor

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2004

Transaction ID: C009902

Amount of Each Receipt this Period

250.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

Full Name (Last, First, Middle Initial)

C. Noreen A. Fenner

Mailing Address

8489 Cabin Hill Road

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tidewater Consulting, Inc.Occupation
govt. relations

Receipt For:

☐ Primary ☒ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

04 / 01 / 2004

Transaction ID: C00ZT01

Amount of Each Receipt this Period

500.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4120.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Nina M. Focardi

Mailing Address

2432 Palham Road, N.

City

St. Petersburg

State

FL

Zip Code

33710

FEC ID number of contributing
federal political committee.☒ CName of Employer
n/aOccupation
homemaker

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

☐ 2000.00

Date of Receipt

☐ 05 / ☐ 05 / ☐ 2004

Transaction ID: C00aR01

Amount of Each Receipt this Period

☐ 2000.00☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

B. Shelley B. Green

Mailing Address

3218 Dungarvan Drive

City

Tallahassee

State

FL

Zip Code

32309

FEC ID number of contributing
federal political committee.☒ CName of Employer
Tidewater Consulting, Inc.Occupation
govt. relations

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

☐ 250.00

Date of Receipt

☐ 04 / ☐ 01 / ☐ 2004

Transaction ID: C00ZS01

Amount of Each Receipt this Period

☐ 250.00☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

C. Kurt P. Gruber

Mailing Address

2909 N. Westmoreland Drive

City

Orlando

State

FL

Zip Code

32804

FEC ID number of contributing
federal political committee.☒ CName of Employer
Island One, Inc.Occupation
resorts

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

☐ 250.00

Date of Receipt

☐ 04 / ☐ 21 / ☐ 2004

Transaction ID: C00aB01

Amount of Each Receipt this Period

☐ 250.00☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

☐ 2500.00

TOTAL This Period (last page this line number only)

☐ 8620.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. William C. Guthrie

Mailing Address

1712 S. Summerlin

City

Orlando

State

FL

Zip Code

32806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baker & HostetlerOccupation
attorney

Receipt For:

☒ Primary
 ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

04	12	2004
----	----	------

Transaction ID: C00aF01

Amount of Each Receipt this Period

250.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a)(1)/441 a-1

Full Name (Last, First, Middle Initial)

B. Deborah L. Linden

Mailing Address

9836 McCormack Place

City

Windermere

State

FL

Zip Code

34786

FEC ID number of contributing
federal political committee.

C

Name of Employer
Island One, Inc.Occupation
resorts

Receipt For:

☒ Primary
 ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

04	21	2004
----	----	------

Transaction ID: C00a501

Amount of Each Receipt this Period

500.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a)(1)/441 a-1

Full Name (Last, First, Middle Initial)

C. Dennis Pustinger

Mailing Address

13221 Mallard Cove Blvd.

City

Orlando

State

FL

Zip Code

32837

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requestedOccupation
information requested

Receipt For:

☒ Primary
 ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

05	05	2004
----	----	------

Transaction ID: C00aP01

Amount of Each Receipt this Period

500.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a)(1)/441 a-1

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

7870.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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PAGE 6 OF 8

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. John C. Schierholz

Mailing Address

4703 Dolphin Cay Lane, S.

City

St. Petersburg

State

FL

Zip Code

33711

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProCrete SystemsOccupation
business manager

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

04 / 12 / 2004

Transaction ID: C00Zx01

Amount of Each Receipt this Period

250.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

Full Name (Last, First, Middle Initial)

B. Tom Slade

Mailing Address

200 W. College Ave., #308

City

Tallahassee

State

FL

Zip Code

32301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tidewater Consulting, Inc.Occupation
govt. relations

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

04 / 01 / 2004

Transaction ID: C00ZV01

Amount of Each Receipt this Period

1000.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

Full Name (Last, First, Middle Initial)

C. Merle L. Stutzman

Mailing Address

11623 Broadacres Road, N.E.

City

Hubbard

State

OR

Zip Code

97032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Voget Meats, Inc.Occupation
general manager

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

04 / 21 / 2004

Transaction ID: C00a801

Amount of Each Receipt this Period

250.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

9370.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a 12	☐ 11b 13a	☐ 11c 13b	☐ 11d 14	☐ 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Thorp S. Thomas

Mailing Address

8328 Lake Serene Drive

City

Orlando

State

FL

Zip Code

32836

FEC ID number of contributing
federal political committee.

C

Name of Employer

Starwood Vacation Ownership

Occupation

vice-president

Receipt For:

☒ Primary ☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

04 / 12 / 2004

Transaction ID: C006703

Amount of Each Receipt this Period

250.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

B. David W. Troxler

Mailing Address

3440 Mountain Tyne Way

City

Sevierville

State

TN

Zip Code

37862

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Troxler Company

Occupation

owner

Receipt For:

☒ Primary ☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

04 / 21 / 2004

Transaction ID: C00aA01

Amount of Each Receipt this Period

1000.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

Full Name (Last, First, Middle Initial)

C. Robert Webb

Mailing Address

P. O. Box 540234

City

Orlando

State

FL

Zip Code

32854

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baker & Hostetler

Occupation

attorney

Receipt For:

☒ Primary ☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

04 / 12 / 2004

Transaction ID: C00aG01

Amount of Each Receipt this Period

500.00

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

11120.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

☒ 11a	☐ 11b	☐ 11c	☐ 11d	
☐ 12	☐ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Leonard E. Williams

Mailing Address

2518 Norfolk Road

City

Orlando

State

FL

Zip Code

32803

FEC ID number of contributing
federal political committee.☒ C

Name of Employer

Wayne Densch, Inc.

Occupation

distributor

Receipt For:

☒ Primary ☐ General
☐ Other (specify): ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2004

Transaction ID: C00aS01

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to opponent's
Spending (2 U.S.C. 441 a(1)(4) 8-1)

SUBTOTAL of Receipts This Page (optional) ➡

1000.00

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

12120.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

☐ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☒ 14
☐ 15			

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Bellsouth

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

7.26

Date of Receipt

06

16

2004

Transaction ID: C001Q01

Amount of Each Receipt this Period

7.26

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1

telephone refund

Full Name (Last, First, Middle Initial)

B. Orange County SOE

Mailing Address

119 W. Kaley Street

City

Orlando

State

FL

Zip Code

32806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

126.20

Date of Receipt

04

27

2004

Transaction ID: C00RK01

Amount of Each Receipt this Period

126.20

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1

petition verification ref

Full Name (Last, First, Middle Initial)

C. Orlando Utilities Commission

Mailing Address

P. O. Box 3193

City

Orlando

State

FL

Zip Code

32802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

73.37

Date of Receipt

06

16

2004

Transaction ID: C005K01

Amount of Each Receipt this Period

73.37

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(i)/441 a-1

utilities refund

SUBTOTAL of Receipts This Page (optional)

206.83

TOTAL This Period (last page this line number only)

206.83

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

☐ 11a	☐ 11b	☐ 11c	☐ 11d	
☐ 12	☐ 13a	☐ 13b	☒ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Sprint

Mailing Address

P. O. Box 96064

City

Charlotte

State

NC

Zip Code

28296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify): ▼

Election Cycle-to-Date ▼

40.83

Date of Receipt

06 /

28 /

2004

Transaction ID: C006h01

Amount of Each Receipt this Period

40.83

☐ Limit increased Due to opponent's
Spending (2 U.S.C. 441 a(1)/441 a-1)

telephone refund

SUBTOTAL of Receipts This Page (optional)

40.83

TOTAL This Period (last page this line number only)

247.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Advantage Consultants

Mailing Address

3191 Maguire Blvd., #161

City

Orlando

State

FL

Zip Code

32803

Purpose of Disbursement

direct mail service

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00Zb01

Date of Disbursement

04	/	12	/	2004
----	---	----	---	------

Amount of Each Disbursement this Period

3179.01

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bank of Tampa

Mailing Address

P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

Purpose of Disbursement

payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D003L0A

Date of Disbursement

04	/	01	/	2004
----	---	----	---	------

Amount of Each Disbursement this Period

5611.14

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bank of Tampa

Mailing Address

P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

Purpose of Disbursement

payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D003L0B

Date of Disbursement

04	/	14	/	2004
----	---	----	---	------

Amount of Each Disbursement this Period

2636.63

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

11426.78

11426.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 2 OF 88

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Bank of Tampa

Mailing Address

P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

Purpose of Disbursement

payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D003L0C

Date of Disbursement

04 / 29 / 2004

Amount of Each Disbursement this Period

404.46

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bank of Tampa

Mailing Address

P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

Purpose of Disbursement

payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D003L0D

Date of Disbursement

04 / 29 / 2004

Amount of Each Disbursement this Period

2836.63

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bank of Tampa

Mailing Address

P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

Purpose of Disbursement

payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D003L0E

Date of Disbursement

08 / 11 / 2004

Amount of Each Disbursement this Period

1080.60

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4121.69

TOTAL This Period (last page this line number only)

15546.47

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a
☐ 20a	☐ 20b	☐ 20c
☐ 21		

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Bank of Tampa

Mailing Address

P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

Purpose of Disbursement

payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General

☐ Other (specify): ▼

State:

District:

Transaction ID: D003L0F

Date of Disbursement:

04 / 05 / 2004

Amount of Each Disbursement this Period

2729.91

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Timothy L. Barr

Mailing Address

2230 Sunny Hill Road

City

Lawrenceville

State

GA

Zip Code

30043

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General

☐ Other (specify): ▼

State:

District:

Transaction ID: D006mDL

Date of Disbursement:

04 / 01 / 2004

Amount of Each Disbursement this Period

843.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Timothy L. Barr

Mailing Address

2230 Sunny Hill Road

City

Lawrenceville

State

GA

Zip Code

30043

Purpose of Disbursement

travel

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General

☐ Other (specify): ▼

State:

District:

Transaction ID: D006mDM

Date of Disbursement:

04 / 02 / 2004

Amount of Each Disbursement this Period

592.45

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4165.86

TOTAL This Period (last page this line number only)

19714.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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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)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Timothy L. Barr

Mailing Address

2230 Sunny Hill Road

City

Lawrenceville

State

GA

Zip Code

30043

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary
☐ Other (specify): ▼☐ General

State:

District:

Transaction ID: D006m0N

Date of Disbursement

04 / 16 / 2004

Amount of Each Disbursement this Period

843.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Timothy L. Barr

Mailing Address

2230 Sunny Hill Road

City

Lawrenceville

State

GA

Zip Code

30043

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary
☐ Other (specify): ▼☐ General

State:

District:

Transaction ID: D006m0O

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

843.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Timothy L. Barr

Mailing Address

2230 Sunny Hill Road

City

Lawrenceville

State

GA

Zip Code

30043

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary
☐ Other (specify): ▼☐ General

State:

District:

Transaction ID: D006m0P

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

843.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

2530.50

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

22244.83

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Timothy L. Barr

Mailing Address

2230 Sunny Hill Road

City

Lawrenceville

State

GA

Zip Code

30043

Purpose of Disbursement

travel

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D006m0Q

Date of Disbursement

05	17	2004
----	----	------

Amount of Each Disbursement this Period

157.32

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Slater W. Bayliss

Mailing Address

3784 Overlook Drive

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000x0d

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

3075.87

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Slater W. Bayliss

Mailing Address

3784 Overlook Drive

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

see memo entry

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000x0e

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

271.36

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3504.55

25749.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Nextel

Mailing Address

P. O. Box 4181

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D005H0G

Date of Disbursement

04 / 02 / 2004

Amount of Each Disbursement this Period

271.36

MEMO☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Slater W. Bayliss

Mailing Address

3784 Overlook Drive

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000x0f

Date of Disbursement

04 / 18 / 2004

Amount of Each Disbursement this Period

3075.87

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Slater W. Bayliss

Mailing Address

3784 Overlook Drive

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

see memo entry

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000x0g

Date of Disbursement

04 / 13 / 2004

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3575.87

TOTAL This Period (last page this line number only)

29325.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. The River Club

Mailing Address

One Independent Drive

City

Jacksonville

State

FL

Zip Code

32202

Purpose of Disbursement

catering deposit

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D00Xc02

Date of Disbursement

04 / 13 / 2004

Amount of Each Disbursement this Period

500.00

MEMO

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Slater W. Bayliss

Mailing Address

3784 Overlook Drive

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000x0h

Date of Disbursement

04 / 23 / 2004

Amount of Each Disbursement this Period

114.85

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Slater W. Bayliss

Mailing Address

3784 Overlook Drive

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000x0i

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

3075.87

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3190.72

TOTAL This Period (last page this line number only)

32515.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 88

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Bellsouth

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D001QDI

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

80.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53**B. Bellsouth**

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D001QDJ

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

21.74

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53**C. Bellsouth**

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D001QOK

Date of Disbursement

04	23	2004
----	----	------

Amount of Each Disbursement this Period

334.57

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

416.31

32932.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Bellsouth

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D001Q0L

Date of Disbursement

05	07	2004
----	----	------

Amount of Each Disbursement this Period

21.74

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bellsouth

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D001Q0M

Date of Disbursement

05	25	2004
----	----	------

Amount of Each Disbursement this Period

445.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bellsouth

Mailing Address

P. O. Box 70529

City

Charlotte

State

NC

Zip Code

28272

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D001QDN

Date of Disbursement

06	23	2004
----	----	------

Amount of Each Disbursement this Period

63.22

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

530.94

33463.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 65

☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Bellwether Consulting Group

Mailing Address

815 Slaters Lane

City

Alexandria

State

VA

Zip Code

22314

Purpose of Disbursement

fundraising consulting

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D006d08

Date of Disbursement

04 / 13 / 2004

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Donald B. Burns

Mailing Address

P. O. Box 481

City

Gotha

State

FL

Zip Code

34734

Purpose of Disbursement

office rent

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D006i05

Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

1917.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Donald B. Burns

Mailing Address

P. O. Box 481

City

Gotha

State

FL

Zip Code

34734

Purpose of Disbursement

office rent

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D006i06

Date of Disbursement

05 / 01 / 2004

Amount of Each Disbursement this Period

1917.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

4834.00

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

38297.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 66

☒ 17	☐ 16	☐ 19a	☐ 21
20a	20b	20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Campaign Graphics

Mailing Address

P. O. Box 4859

City

Ocala

State

FL

Zip Code

34478

Purpose of Disbursement

lapel stickers

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D003h05

Date of Disbursement

04	DB	2004
----	----	------

Amount of Each Disbursement this Period

172.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Citi Cards

Mailing Address

P. O. Box 8117

City

South Hackensack

State

NJ

Zip Code

07606

Purpose of Disbursement

see memo entries

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D007106

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

1736.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Delta Air Lines

Mailing Address

Hartsfield Intl. Airport

City

Atlanta

State

GA

Zip Code

30320

Purpose of Disbursement

travel

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D000W06

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

229.10

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1909.00

40206.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 66

☒ 17	☐ 18	☐ 19a	☐ 21
20a	20b	20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Delta Air Lines

Mailing Address

Hartsfield Intl. Airport

City

Atlanta

State

GA

Zip Code

30320

Purpose of Disbursement
travel

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00QW0H

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

183.60

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Go Travel

Mailing Address

1210 Edgewater Drive

City

Orlando

State

FL

Zip Code

32804

Purpose of Disbursement
travel agency fee

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00OR0L

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

20.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Go Travel

Mailing Address

1210 Edgewater Drive

City

Orlando

State

FL

Zip Code

32804

Purpose of Disbursement
travel agency fee

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00OR0M

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

20.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

40206.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 22
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Hampton Inn

Mailing Address

1331 Prudential Drive

City

Jacksonville

State

FL

Zip Code

32207

Purpose of Disbursement

lodging

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D00au01

Date of Disbursement

04 / 08 / 2004

08

2004

Amount of Each Disbursement this Period

123.17

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Hampton Inn

Mailing Address

1331 Prudential Drive

City

Jacksonville

State

FL

Zip Code

32207

Purpose of Disbursement

lodging

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D00au02

Date of Disbursement

04 / 08 / 2004

08

2004

Amount of Each Disbursement this Period

87.01

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Nextel

Mailing Address

P. O. Box 4181

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D005HQH

Date of Disbursement

04 / 08 / 2004

08

2004

Amount of Each Disbursement this Period

32.24

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

0.00

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

40206.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Citi Cards

Mailing Address

P. O. Box 8117

City

South Hackensack

State

NJ

Zip Code

07606

Purpose of Disbursement
see memo entries

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D007i07

Date of Disbursement

05	07	2004
----	----	------

Amount of Each Disbursement this Period

1597.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Campus House

Mailing Address

543B Rawson Lane

City

Pensacola

State

FL

Zip Code

32503

Purpose of Disbursement
lodging

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00YK02

Date of Disbursement

04	03	2004
----	----	------

Amount of Each Disbursement this Period

53.52

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cracker Barrel

Mailing Address

1520 E. State Road 50

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement
meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00ag01

Date of Disbursement

04	06	2004
----	----	------

Amount of Each Disbursement this Period

78.92

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

1597.98

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

41804.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 66

☒ 17	☐ 18	☐ 19a	☐ 21
20a	20b	20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

CDD39Q120

Full Name (Last, First, Middle Initial)

A. Delta Air Lines

Mailing Address

Hartsfield Intl. Airport

City

Atlanta

State

GA

Zip Code

30320

Purpose of Disbursement

travel

Candidate Name

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000W0E

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

354.10

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Delta Air Lines

Mailing Address

Hartsfield Intl. Airport

City

Atlanta

State

GA

Zip Code

30320

Purpose of Disbursement

travel

Candidate Name

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000W0F

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

378.60

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Go Travel

Mailing Address

1210 Edgewater Drive

City

Orlando

State

FL

Zip Code

32804

Purpose of Disbursement

travel agency fee

Candidate Name

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000R0I

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

30.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

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

0.00

41804.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 86

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Go Travel

Mailing Address

1210 Edgewater Drive

City

Orlando

State

FL

Zip Code

32804

Purpose of Disbursement

travel agency fee

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000R0J

Date of Disbursement

04 / 02 / 2004

02

2004

Amount of Each Disbursement this Period

20.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Go Travel

Mailing Address

1210 Edgewater Drive

City

Orlando

State

FL

Zip Code

32804

Purpose of Disbursement

travel agency fee

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000R0K

Date of Disbursement

04 / 06 / 2004

06

2004

Amount of Each Disbursement this Period

30.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Publix Super Markets

Mailing Address

P. O. Box 407

City

Lakeland

State

FL

Zip Code

33802

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000L06

Date of Disbursement

04 / 18 / 2004

18

2004

Amount of Each Disbursement this Period

129.32

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

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

0.00

41804.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Citi Cards

Mailing Address

P. O. Box 8117

City

South Hackensack

State

NJ

Zip Code

07606

Purpose of Disbursement

see memo entries

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D007108

Date of Disbursement

06	09	2004
----	----	------

Amount of Each Disbursement this Period

141.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000VDJ

Date of Disbursement

04	24	2004
----	----	------

Amount of Each Disbursement this Period

43.98

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Conference Call Service

Mailing Address

1450 U.S. Route 22 W., #203

City

Mountainside

State

NJ

Zip Code

07092

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D005106

Date of Disbursement

04	12	2004
----	----	------

Amount of Each Disbursement this Period

57.31

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

199.29

42003.49

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 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)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Conference Call Service

Mailing Address

1450 U.S. Route 22 W., #203

City

Mountainside

State

NJ

Zip Code

07092

Purpose of Disbursement

telephone

Candidate Name

Office Sought:

State:

District:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify):

Category/
Type

Transaction ID: D005107

Date of Disbursement

05	07	2004
----	----	------

Amount of Each Disbursement this Period

3.92

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. The Drummond Press

Mailing Address

P. O. Box 2421

City

Jacksonville

State

FL

Zip Code

32203

Purpose of Disbursement

printing

Candidate Name

Office Sought:

State:

District:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify):

Category/
Type

Transaction ID: D00PD05

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

389.02

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. The Drummond Press

Mailing Address

P. O. Box 2421

City

Jacksonville

State

FL

Zip Code

32203

Purpose of Disbursement

printing

Candidate Name

Office Sought:

State:

District:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify):

Category/
Type

Transaction ID: D00PD06

Date of Disbursement

04	28	2004
----	----	------

Amount of Each Disbursement this Period

1490.15

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1863.09

43866.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00380120

Full Name (Last, First, Middle Initial)

A. Jaryn A. Emhof

Mailing Address

5250 Ochlockonee Road

City

Tallahassee

State

FL

Zip Code

32303

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Transaction ID: D001J09

Date of Disbursement

04	05	2004
----	----	------

Amount of Each Disbursement this Period

397.60

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement

delivery

Candidate Name

Category/
Type

Transaction ID: D000v0Y

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

64.86

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement

delivery

Candidate Name

Category/
Type

Transaction ID: D000v0Z

Date of Disbursement

04	12	2004
----	----	------

Amount of Each Disbursement this Period

209.15

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional) ➡

671.61

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

44538.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 88

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000v0a

Date of Disbursement

04	20	2004
----	----	------

Amount of Each Disbursement this Period

55.05

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000v0b

Date of Disbursement

04	26	2004
----	----	------

Amount of Each Disbursement this Period

33.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000v0c

Date of Disbursement

05	03	2004
----	----	------

Amount of Each Disbursement this Period

18.44

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

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

105.47

44643.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFDR LINE NUMBER:
(check only one)

PAGE 21 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

CD0390120

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000vQd

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

10.68

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000vGe

Date of Disbursement

05	18	2004
----	----	------

Amount of Each Disbursement this Period

35.56

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000vOf

Date of Disbursement

05	25	2004
----	----	------

Amount of Each Disbursement this Period

44.64

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

90.88

44734.54

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 68

☒ 17	☐ 18	☐ 19a	
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address

P. O. Box 1140

City

Memphis

State

TN

Zip Code

38101

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000v0g

Date of Disbursement

06	03	2004
----	----	------

Amount of Each Disbursement this Period

7.63

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Florida U.C. Fund

Mailing Address

5050 W. Tennessee Street

City

Tallahassee

State

FL

Zip Code

32399

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003n03

Date of Disbursement

04	29	2004
----	----	------

Amount of Each Disbursement this Period

1365.06

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. John D. Gelsthorpe

Mailing Address

19135 U.S. Hwy. 19, N., #30A

City

Clearwater

State

FL

Zip Code

33764

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00PG0F

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2022.81

46757.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 65

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. John D. Gelsthorpe

Mailing Address

19135 U.S. Hwy. 19, N., #3DA

City

Clearwater

State

FL

Zip Code

33764

Purpose of Disbursement

travel

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00PC0G

Date of Disbursement:

04	02	2004
----	----	------

Amount of Each Disbursement this Period

333.10

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. John D. Gelsthorpe

Mailing Address

19135 U.S. Hwy. 19, N., #30A

City

Clearwater

State

FL

Zip Code

33764

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00PC0H

Date of Disbursement:

04	18	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. John D. Gelsthorpe

Mailing Address

19135 U.S. Hwy. 19, N., #30A

City

Clearwater

State

FL

Zip Code

33764

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00PC0I

Date of Disbursement:

04	30	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1633.34

48390.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. John D. Gelsthorpe

Mailing Address

19135 U.S. Hwy. 19, N., #30A

City

Clearwater

State

FL

Zip Code

33764

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D00PC0J

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. John D. Gelsthorpe

Mailing Address

19135 U.S. Hwy. 19, N., #30A

City

Clearwater

State

FL

Zip Code

33764

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D00PC0K

Date of Disbursement:

05	17	2004
----	----	------

Amount of Each Disbursement this Period

91.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Gen-X Strategies

Mailing Address

P. O. Box 16872

City

Alexandria

State

VA

Zip Code

22302

Purpose of Disbursement

online fundraising

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D003M08

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

39.95

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

781.07

49171.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Gen-X Strategies

Mailing Address

P. O. Box 16672

City

Alexandria

State

VA

Zip Code

22302

Purpose of Disbursement

online fundraising

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003M09

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

39.95

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Gen-X Strategies

Mailing Address

P. O. Box 16672

City

Alexandria

State

VA

Zip Code

22302

Purpose of Disbursement

online fundraising

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003M0A

Date of Disbursement:

06	16	2004
----	----	------

Amount of Each Disbursement this Period

159.80

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. The David Johnson Group, LLC

Mailing Address

3264 Whitney Drive, E.

City

Tallahassee

State

FL

Zip Code

32309

Purpose of Disbursement

political consulting

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D001LDA

Date of Disbursement:

04	01	2004
----	----	------

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5199.75

54371.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Line 1 Communications

Mailing Address

3400 Birchwood Manor

City

Tallahassee

State

FL

Zip Code

32312

Purpose of Disbursement

fax services

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D004605

Date of Disbursement

04	13	2004
----	----	------

Amount of Each Disbursement this Period

534.32

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. MBNA America

Mailing Address

P. O. Box 15019

City

Wilmington

State

DE

Zip Code

19886

Purpose of Disbursement

see memo entries

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00PF04

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

10823.85

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Comfort Inn

Mailing Address

11501 S. Cleveland Avenue

City

Fort Myers

State

FL

Zip Code

33907

Purpose of Disbursement

lodging

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00bB01

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

228.84

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

11358.17

TOTAL This Period (last page this line number only)

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 66

☒ 17
20a ☐ 18
20b ☐ 19a
20c ☐ 21Any 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)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

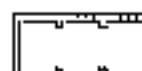
Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd02

Date of Disbursement

☐ 04 / ☐ 08 / ☐ 2004

Amount of Each Disbursement this Period

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

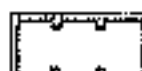
Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd03

Date of Disbursement

☐ 04 / ☐ 08 / ☐ 2004

Amount of Each Disbursement this Period

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

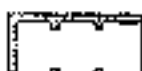
Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd04

Date of Disbursement

☐ 04 / ☐ 08 / ☐ 2004

Amount of Each Disbursement this Period

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

Zip Code

33434

Purpose of Disbursement
toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd05

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

25.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

Zip Code

33434

Purpose of Disbursement
toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd06

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

25.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

Zip Code

33434

Purpose of Disbursement
toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd07

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

25.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00
65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 68

☒ 17 21a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd08

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

25.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Mail and More

Mailing Address

5764 N. Orange Blossom Trail

City

Orlando

State

FL

Zip Code

32810

Purpose of Disbursement

shipping

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00b201

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

459.76

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000V0M

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

31.93

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 65

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000OV0N

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

95.27

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000OV0O

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

133.13

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000OV0P

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

74.55

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000V00Q

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

31.20

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000V00R

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

263.59

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000V00S

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

38.49

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Olive Garden

Mailing Address

4101 Conroy Road

City

Orlando

State

FL

Zip Code

32839

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Y302

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

66.83

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Publix Super Markets

Mailing Address

P. O. Box 407

City

Lakeland

State

FL

Zip Code

33802

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Ou07

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

38.03

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Oh0A

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

5.19

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000h0B

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

23.92

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000h0C

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

17.82

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1D

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

33.30

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1E

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

33.30

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

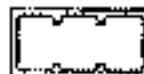
Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1F

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

33.30

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1G

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

15.59

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

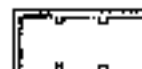
Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1H

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

118.32

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1I

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

180.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

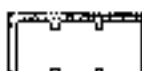
Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1J

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

2035.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1K

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

17.10

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1L

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

107.62

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1M

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

1850.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

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

0.00

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 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)

Daniel Webster for U.S. Senate

C0039D120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1N

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

3172.08

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1O

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

17.42

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1P

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

33.30

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

0.00

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

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1Q

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

33.30

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1R

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

41.78

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1S

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

44.48

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1T

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

63.51

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1U

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

6.30

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1V

Date of Disbursement:

04	08	2004
----	----	------

Amount of Each Disbursement this Period

39.47

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

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

0.00

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1W

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

129.41

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1X

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

39.35

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Wal-Mart Super Center

Mailing Address

2500 S. Kirkman Road

City

Orlando

State

FL

Zip Code

32811

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00bG01

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

38.38

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65729.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. MBNA America

Mailing Address

P. O. Box 15019

City

Wilmington

State

DE

Zip Code

19886

Purpose of Disbursement

see memo entries

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00PF05

Date of Disbursement

05	07	2004
----	----	------

Amount of Each Disbursement this Period

3125.20

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00Yd09

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

25.00

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00Yd0A

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

25.00

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3125.20

68854.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Florida Department of Transportation

Mailing Address

7941 Glades Road

City

Boca Raton

State

FL

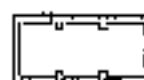
Zip Code

33434

Purpose of Disbursement

toll passes

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Yd08

Date of Disbursement

04	09	2004
----	----	------

Amount of Each Disbursement this Period

10.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Publix Super Markets

Mailing Address

P. O. Box 407

City

Lakeland

State

FL

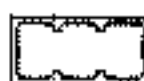
Zip Code

33802

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Ou08

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

14.03

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Publix Super Markets

Mailing Address

P. O. Box 407

City

Lakeland

State

FL

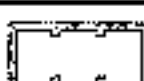
Zip Code

33802

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00Ou09

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

12.04

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

68854.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00Ch0D

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

31.87

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00Ch0E

Date of Disbursement

04	03	2004
----	----	------

Amount of Each Disbursement this Period

34.12

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Turkey Lake Press

Mailing Address

4900-A Kirkman Road

City

Orlando

State

FL

Zip Code

32811

Purpose of Disbursement
printing

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00P504

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

138.45

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

68854.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1Y

Date of Disbursement:

04	01	2004
----	----	------

Amount of Each Disbursement this Period

3.58

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1Z

Date of Disbursement:

04	01	2004
----	----	------

Amount of Each Disbursement this Period

3.53

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1a

Date of Disbursement:

04	01	2004
----	----	------

Amount of Each Disbursement this Period

52.29

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

68854.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1b

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

52.23

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1c

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

1480.00

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary	☐ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D000u1d

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

23.01

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

68854.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General



Other (specify): ▼

State:

District:

Transaction ID: D000u1e

Date of Disbursement



Amount of Each Disbursement this Period

MEMO**Credit Card Item**Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General



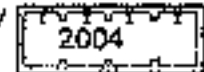
Other (specify): ▼

State:

District:

Transaction ID: D000u1f

Date of Disbursement



Amount of Each Disbursement this Period

MEMO**Credit Card Item**Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General



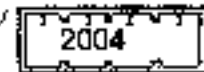
Other (specify): ▼

State:

District:

Transaction ID: D000u1g

Date of Disbursement



Amount of Each Disbursement this Period

MEMO**Credit Card Item**Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary
☐ Other (specify): ▼☐ General

State:

District:

Transaction ID: D000u1h

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

0.83

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary
☐ Other (specify): ▼☐ General

State:

District:

Transaction ID: D000u1i

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

0.60

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary
☐ Other (specify): ▼☐ General

State:

District:

Transaction ID: D000u1j

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

0.60

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00

68854.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a ☐ 18 20b ☐ 19a 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C0039D120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1k

Date of Disbursement

☐ 01 / ☐ 02 / ☐ 2004

Amount of Each Disbursement this Period

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Wal-Mart Super Center

Mailing Address

2500 S. Kirkman Road

City

Orlando

State

FL

Zip Code

32811

Purpose of Disbursement

gift certificates

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00bG02

Date of Disbursement

☐ 04 / ☐ 08 / ☐ 2004

Amount of Each Disbursement this Period

MEMO**Credit Card Item**
☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. MBNA America

Mailing Address

P. O. Box 15019

City

Wilmington

State

DE

Zip Code

19886

Purpose of Disbursement

see memo entries

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00PF06

Date of Disbursement

☐ 06 / ☐ 11 / ☐ 2004

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Cracker Barrel

Mailing Address

1520 E. State Road 50

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00ag02

Date of Disbursement:

05	07	2004
----	----	------

Amount of Each Disbursement this Period

153.74

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.83

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00OV0K

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

127.78

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.83

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00OV0L

Date of Disbursement:

05	17	2004
----	----	------

Amount of Each Disbursement this Period

37.22

MEMO**Credit Card Item**☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.83

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

89437.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000h08

Date of Disbursement

04	28	2004
----	----	------

Amount of Each Disbursement this Period

19.56

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Target

Mailing Address

1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000h09

Date of Disbursement

04	22	2004
----	----	------

Amount of Each Disbursement this Period

19.06

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1A

Date of Disbursement

04	28	2004
----	----	------

Amount of Each Disbursement this Period

7.08

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00
69437.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C0039D120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1B

Date of Disbursement

05	13	2004
----	----	------

Amount of Each Disbursement this Period

63.00

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000u1C

Date of Disbursement

05	19	2004
----	----	------

Amount of Each Disbursement this Period

59.78

MEMO

Credit Card Item

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Majority Strategies

Mailing Address

274 Marconi Blvd., #260

City

Columbus

State

OH

Zip Code

43215

Purpose of Disbursement

direct mail service

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00D806

Date of Disbursement

04	12	2004
----	----	------

Amount of Each Disbursement this Period

14810.20

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

14810.20

84247.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 28 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. New Media Communications, Inc.

Mailing Address

3046 Brecksville Road

City

Richfield

State

OH

Zip Code

44286

Purpose of Disbursement

web site hosting

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000e0H

Date of Disbursement

04	08	2004
----	----	------

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. New Media Communications, Inc.

Mailing Address

3046 Brecksville Road

City

Richfield

State

OH

Zip Code

44286

Purpose of Disbursement

web site hosting

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000e0I

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. New Media Communications, Inc.

Mailing Address

3046 Brecksville Road

City

Richfield

State

OH

Zip Code

44286

Purpose of Disbursement

online fundraising

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000e0J

Date of Disbursement

05	17	2004
----	----	------

Amount of Each Disbursement this Period

185.87

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

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

435.87

84883.81

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. New Media Communications, Inc.

Mailing Address

3046 Brecksville Road

City

Richfield

State

OH

Zip Code

44288

Purpose of Disbursement

web site hosting

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000e0K

Date of Disbursement

06	03	2004
----	----	------

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. New Media Communications, Inc.

Mailing Address

3046 Brecksville Road

City

Richfield

State

OH

Zip Code

44288

Purpose of Disbursement

online fundraising

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000e0L

Date of Disbursement

04	16	2004
----	----	------

Amount of Each Disbursement this Period

382.73

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Nextel

Mailing Address

P. O. Box 4181

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General☐ Other (specify): ▼

State:

District:

Transaction ID: D005H08

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

480.76

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

988.49

85672.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Nextel

Mailing Address

P. O. Box 4181

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005H0E

Date of Disbursement

05	/	11	/	2004
----	---	----	---	------

Amount of Each Disbursement this Period

2638.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Nextel

Mailing Address

P. O. Box 4181

City

Carol Stream

State

IL

Zip Code

60197

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005H0F

Date of Disbursement

06	/	14	/	2004
----	---	----	---	------

Amount of Each Disbursement this Period

26.14

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Jay O'Callaghan

Mailing Address

2850 Subtle Lane

City

Fairfax

State

VA

Zip Code

22031

Purpose of Disbursement

database services

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00aa01

Date of Disbursement

05	/	17	/	2004
----	---	----	---	------

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3164.64

TOTAL This Period (last page this line number only)

88836.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address

2200 Old Germantown Rd.

City

Delray Beach

State

FL

Zip Code

33445

Purpose of Disbursement

office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General



Other (specify): ▼

State:

District:

Transaction ID: D000V01

Date of Disbursement

04	12	2004
----	----	------

Amount of Each Disbursement this Period

1921.72

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ray Olach

Mailing Address

7027 Ardis Street

City

Orlando

State

FL

Zip Code

32835

Purpose of Disbursement

media consulting

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General



Other (specify): ▼

State:

District:

Transaction ID: D00XD01

Date of Disbursement

04	02	2004
----	----	------

Amount of Each Disbursement this Period

1550.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Omnispring, LLC

Mailing Address

1711 S. Division Avenue

City

Orlando

State

FL

Zip Code

32805

Purpose of Disbursement

Internet service

Candidate Name

Category/
Type

Office Sought:

Disbursement For:



Primary



General



Other (specify): ▼

State:

District:

Transaction ID: D003g08

Date of Disbursement

04	28	2004
----	----	------

Amount of Each Disbursement this Period

99.99

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3571.71

92408.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Orlando Utilities Commission

Mailing Address

P. O. Box 3193

City

Orlando

State

FL

Zip Code

32802

Purpose of Disbursement
utilities

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005K05

Date of Disbursement

04	26	2004
----	----	------

Amount of Each Disbursement this Period

219.99

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Sarah C. Owen

Mailing Address

1610-A Carlewood Ct.

City

Tallahassee

State

FL

Zip Code

32308

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003z0R

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

1319.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Sarah C. Owen

Mailing Address

1610-A Carlewood Ct.

City

Tallahassee

State

FL

Zip Code

32308

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003z0S

Date of Disbursement

04	16	2004
----	----	------

Amount of Each Disbursement this Period

1319.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2859.95

95268.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Sarah C. Owen

Mailing Address

1610-A Carolewood Ct.

City

Tallahassee

State

FL

Zip Code

32308

Purpose of Disbursement

travel/meals

Candidate Name

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D003z0T

Date of Disbursement

04 / 28 / 2004

28

2004

Amount of Each Disbursement this Period

358.30

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Sarah C. Owen

Mailing Address

1610-A Carolewood Ct.

City

Tallahassee

State

FL

Zip Code

32308

Purpose of Disbursement

salary

Candidate Name

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D003z0U

Date of Disbursement

04 / 30 / 2004

30

2004

Amount of Each Disbursement this Period

1319.98

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Sarah C. Owen

Mailing Address

1610-A Carolewood Ct.

City

Tallahassee

State

FL

Zip Code

32308

Purpose of Disbursement

lease term fee

Candidate Name

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D003z0V

Date of Disbursement

05 / 03 / 2004

03

2004

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

1928.28

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

97196.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Sprint

Mailing Address

P. O. Box 96064

City

Charlotte

State

NC

Zip Code

28296

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D006h06

Date of Disbursement

04 / 20 / 2004

20

2004

Amount of Each Disbursement this Period

100.33

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

B. Sprint

Full Name (Last, First, Middle Initial)

Mailing Address

P. O. Box 96064

City

Charlotte

State

NC

Zip Code

28296

Purpose of Disbursement

telephone

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D006h07

Date of Disbursement

05 / 25 / 2004

25

2004

Amount of Each Disbursement this Period

90.48

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

C. Tensor Engineering

Full Name (Last, First, Middle Initial)

Mailing Address

2060 S. Patrick Drive

City

Indian Harbour Bea

State

FL

Zip Code

32937

Purpose of Disbursement

flight-3/30/04

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D00Ym01

Date of Disbursement

04 / 08 / 2004

08

2004

Amount of Each Disbursement this Period

1084.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) →

1284.79

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

98481.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 88

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Andrew Tyrrell

Mailing Address

1503 Cashiers Drive

City

Winter Garden

State

FL

Zip Code

34787

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005P08

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Andrew Tyrrell

Mailing Address

1503 Cashiers Drive

City

Winter Garden

State

FL

Zip Code

34787

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005P0C

Date of Disbursement

04	16	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Andrew Tyrrell

Mailing Address

1503 Cashiers Drive

City

Winter Garden

State

FL

Zip Code

34787

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005P0D

Date of Disbursement

04	30	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1950.36
100432.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Andrew Tyrrell

Mailing Address

1503 Cashiers Drive

City

Winter Garden

State

FL

Zip Code

34787

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005P0E

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Andrew Tyrrell

Mailing Address

1503 Cashiers Drive

City

Winter Garden

State

FL

Zip Code

34787

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005P0F

Date of Disbursement

05	26	2004
----	----	------

Amount of Each Disbursement this Period

650.12

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Andrew Tyrrell

Mailing Address

1503 Cashiers Drive

City

Winter Garden

State

FL

Zip Code

34787

Purpose of Disbursement
salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D005P0G

Date of Disbursement

06	30	2004
----	----	------

Amount of Each Disbursement this Period

325.06

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

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

1625.30

102057.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address

Pine Hills Branch

City

Orlando

State

FL

Zip Code

32808

Purpose of Disbursement

postage

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000u19

Date of Disbursement

04 / 05 / 2004

05 / 05 / 2004

2004

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Villa Tuscany

Mailing Address

753 Sherwood Terrace Dr.

City

Orlando

State

FL

Zip Code

32818

Purpose of Disbursement

rent/lease term

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D000aK01

Date of Disbursement

05 / 03 / 2004

03 / 03 / 2004

2004

Amount of Each Disbursement this Period

1747.50

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Debra A. Warren

Mailing Address

8815 Hackney Prairie Road

City

Orlando

State

FL

Zip Code

32818

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐

Other (specify): ▼

State:

District:

Transaction ID: D002d07

Date of Disbursement

04 / 01 / 2004

01 / 01 / 2004

2004

Amount of Each Disbursement this Period

692.13

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

7439.63

TOTAL This Period (last page this line number only)

109496.96

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Debra A. Warren

Mailing Address

8815 Hackney Prairie Road

City

Orlando

State

FL

Zip Code

32818

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D002d08

Date of Disbursement

04	16	2004
----	----	------

Amount of Each Disbursement this Period

692.13

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Debra A. Warren

Mailing Address

8815 Hackney Prairie Road

City

Orlando

State

FL

Zip Code

32818

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D002d09

Date of Disbursement

04	30	2004
----	----	------

Amount of Each Disbursement this Period

692.13

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Debra A. Warren

Mailing Address

8815 Hackney Prairie Road

City

Orlando

State

FL

Zip Code

32818

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D002d0A

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

692.13

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2076.39

TOTAL This Period (last page this line number only)

111573.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Debra A. Warren

Mailing Address

8815 Hackney Prairie Road

City

Orlando

State

FL

Zip Code

32818

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D002d08

Date of Disbursement

05	17	2004
----	----	------

Amount of Each Disbursement this Period

9.42

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Robert Watkins & Company

Mailing Address

610 S. Boulevard

City

Tampa

State

FL

Zip Code

33606

Purpose of Disbursement
accounting services

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003i07

Date of Disbursement

04	01	2004
----	----	------

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Robert Watkins & Company

Mailing Address

610 S. Boulevard

City

Tampa

State

FL

Zip Code

33606

Purpose of Disbursement
accounting services

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003i08

Date of Disbursement

05	01	2004
----	----	------

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

20009.42

131582.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 68

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00380120

Full Name (Last, First, Middle Initial)

A. Robert Watkins & Company

Mailing Address

610 S. Boulevard

City

Tampa

State

FL

Zip Code

33608

Purpose of Disbursement

accounting services

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D003109

Date of Disbursement

06 / 01 / 2004

01

2004

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Regina L. Webster

Mailing Address

14506 Peppermill Trail

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00340F

Date of Disbursement

04 / 01 / 2004

01

2004

Amount of Each Disbursement this Period

859.75

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Regina L. Webster

Mailing Address

14506 Peppermill Trail

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

meals

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒

Primary

☐

General

☐ Other (specify): ▼

State:

District:

Transaction ID: D00340G

Date of Disbursement

04 / 12 / 2004

12

2004

Amount of Each Disbursement this Period

24.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

10893.75

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

142476.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 66

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
---	------------------------------------	-------------------------------------	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Regina L. Webster

Mailing Address

14506 Peppermill Trail

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00340H

Date of Disbursement

04 / 15 / 2004

Amount of Each Disbursement this Period

869.75

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Regina L. Webster

Mailing Address

14506 Peppermill Trail

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00340I

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

869.75

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Regina L. Webster

Mailing Address

14506 Peppermill Trail

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00340J

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

869.75

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2809.25

145085.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 88

☒ 17 20a	☐ 18 20b	☐ 19a 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)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Regina L. Webster

Mailing Address

14506 Peppermill Trail

City

Clermont

State

FL

Zip Code

34711

Purpose of Disbursement

salary

Candidate Name

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☒ Primary ☐ General
☐ Other (specify): ▼

Transaction ID: D00340K

Date of Disbursement

MM	DD	YY
06	30	2004

Amount of Each Disbursement this Period

1304.62

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

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

1304.62
146390.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1 OF 17

☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Henry H. Beckwith

Mailing Address

3277 Hwy 17, S.

City

Orange Park

State

FL

Zip Code

32003

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00QW01

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ray J. Berryman

Mailing Address

12137 Crescent Cove Court

City

Windermere

State

FL

Zip Code

34786

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D002N01

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

1100.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Pamela K. Bjorkman

Mailing Address

1159 Spanish Lace Lane

City

Vero Beach

State

FL

Zip Code

32963

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D006101

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

3600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00380120

Full Name (Last, First, Middle Initial)

A. Russell L. Bjorkman

Mailing Address

1159 Spanish Lace Lane

City

Vero Beach

State

FL

Zip Code

32963

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D006201

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2004

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. John M. Camillo

Mailing Address

296 N.W. 119th Lane

City

Coral Springs

State

FL

Zip Code

33071

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D003T01

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2004

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. John K. Castle

Mailing Address

1085 N. Ocean Blvd.

City

Palm Beach

State

FL

Zip Code

33480

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00XJ01

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

7100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Richard E. Coates

Mailing Address

11134 Penneway Trace

City

Tallahassee

State

FL

Zip Code

32317

Purpose of Disbursement
contribution refund

Candidate Name

Office Sought:

State:

District:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

Transaction ID: D00ZU01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. John B. Coxwell

Mailing Address

9433 Coxwell Lane

City

Jacksonville

State

FL

Zip Code

32221

Purpose of Disbursement
contribution refund

Candidate Name

Office Sought:

State:

District:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

Transaction ID: D00Qn03

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Florence A. DeGeorge

Mailing Address

176 Spyglass Lane

City

Jupiter

State

FL

Zip Code

33477

Purpose of Disbursement
contribution refund

Candidate Name

Office Sought:

State:

District:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

Transaction ID: D003bD1

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5000.00

12100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Lawrence J. DeGeorge

Mailing Address

176 Spyglass Lane

City

Jupiter

State

FL

Zip Code

33477

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D001701

Date of Disbursement:

05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. R. Bruce Deardoff

Mailing Address

509 E. Nasa Blvd.

City

Melbourne

State

FL

Zip Code

32901

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00BZ01

Date of Disbursement:

05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Sandra M. Deardoff

Mailing Address

509 E. Nasa Blvd.

City

Melbourne

State

FL

Zip Code

32901

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00Ba01

Date of Disbursement:

05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

18100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Pat D. Dizney

Mailing Address

1110 S.W. Ivanhoe Blvd.

City

Orlando

State

FL

Zip Code

32804

Purpose of Disbursement

contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D002M01

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Edward W. Easton

Mailing Address

10165 N.W. 19th Street

City

Miami

State

FL

Zip Code

33172

Purpose of Disbursement

contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D003GD1

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Noreen A. Fenner

Mailing Address

8489 Cabin Hill Road

City

Tallahassee

State

FL

Zip Code

32311

Purpose of Disbursement

contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D002T01

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ➡

4500.00

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

22600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Charles R. Forman

Mailing Address

P. O. Box 159

City
OcalaState
FLZip Code
34478Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D008h01

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Miles A. Forman

Mailing Address

P. O. Box 640

City
Fort LauderdaleState
FLZip Code
33302Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D008i01

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Eloise D. Gay

Mailing Address

524 Stockton Street

City
JacksonvilleState
FLZip Code
32204Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D00RH01

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

6000.00

28000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. William W. Gay

Mailing Address

524 Stockton Street

City

Jacksonville

State

FL

Zip Code

32204

Purpose of Disbursement

contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary
☐ Other (specify): ▼
☒ General

State:

District:

Transaction ID: D00RG01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Murray H. Goodman

Mailing Address

777 S. Flagler Drive, Phillips Pt.

City

West Palm Beach

State

FL

Zip Code

33401

Purpose of Disbursement

contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary
☐ Other (specify): ▼
☒ General

State:

District:

Transaction ID: D00VI01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Susan Harrison

Mailing Address

213 Bunkers Cove Road

City

Panama City

State

FL

Zip Code

32401

Purpose of Disbursement

contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary
☐ Other (specify): ▼
☒ General

State:

District:

Transaction ID: D007Y01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

34600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 17

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. William G. Harrison

Mailing Address

213 Bunkers Cove Road

City

Panama City

State

FL

Zip Code

32401

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003F01

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Christopher B. Herrin

Mailing Address

1734 River Plantation Lane

City

Jacksonville

State

FL

Zip Code

32223

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003I01

Date of Disbursement:

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cindy M. Herrin

Mailing Address

1734 River Plantation Lane

City

Jacksonville

State

FL

Zip Code

32223

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D003H01

Date of Disbursement:

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

40600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 17

☐ 17 ☒ 20a	☐ 18 ☐ 20b	☐ 19a ☐ 20c	☐ 21
--	---	--	-----------------------------

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Elizabeth Johnson

Mailing Address

1402 White Star Lane

City

Tallahassee

State

FL

Zip Code

32312

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000401

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Jon E. Johnson

Mailing Address

1402 White Star Lane

City

Tallahassee

State

FL

Zip Code

32312

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000301

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. John F. Kirtley

Mailing Address

601 N. Ashley Drive, #500

City

Tampa

State

FL

Zip Code

33602

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D001r01

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

46600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 17

☐ 17	☐ 18	☐ 19a	
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. K. D. Kirtley

Mailing Address

601 N. Ashley Drive, #500

City

Tampa

State

FL

Zip Code

33602

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D001s01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. C. Reed Knight

Mailing Address

7750 9th Street, S.W.

City

Vero Beach

State

FL

Zip Code

32968

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D007d01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. James M. Lombard

Mailing Address

P. O. Box 280

City

Osprey

State

FL

Zip Code

34229

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000ID1

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5000.00

51600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Patricia R. Lombard

Mailing Address

P. O. Box 280

City

Osprey

State

FL

Zip Code

34229

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D000m01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. James E. MacDougald

Mailing Address

1721 Brightwaters Blvd., N.E.

City

St. Petersburg

State

FL

Zip Code

33704

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00Sc01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Suzanne M. MacDougald

Mailing Address

1721 Brightwaters Blvd., N.E.

City

St. Petersburg

State

FL

Zip Code

33704

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00Sd01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

6000.00
57600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 17

☐ 17 ☒ 20a	☐ 18 ☐ 20b	☐ 19a ☐ 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Karen McElheney

Mailing Address

408 S. Bonita Avenue

City

Panama City

State

FL

Zip Code

32401

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary
☐ Other (specify): ▼
☒ General

State:

District:

Transaction ID: D006u01

Date of Disbursement

05 / 14 / 2004

14

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Randall A. McElheney

Mailing Address

408 S. Bonita Avenue

City

Panama City

State

FL

Zip Code

32401

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary
☐ Other (specify): ▼
☒ General

State:

District:

Transaction ID: D003B01

Date of Disbursement

05 / 14 / 2004

14

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Philip E. Morgan

Mailing Address

1381 N.W. 13th Court

City

Fort Lauderdale

State

FL

Zip Code

33339

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary
☐ Other (specify): ▼
☒ General

State:

District:

Transaction ID: D003P01

Date of Disbursement

05 / 14 / 2004

14

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

63600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. David Neill

Mailing Address

2709 McNeil Road

City

Fort Pierce

State

FL

Zip Code

34981

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00BD01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Lourdes M. Prescott

Mailing Address

1268 Gallp Drive

City

Loxahatchee

State

FL

Zip Code

33470

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00AI01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Randal L. Ringhaver

Mailing Address

5855 S.R. 13, N.

City

Jacksonville

State

FL

Zip Code

32258

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00Qs01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

68600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 17

☒ 17 20a	☐ 18 20b	☐ 19a 20c	☐ 21
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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Martha A. Rish

Mailing Address

450 Blake Drive

City

Wewahitchka

State

FL

Zip Code

32465

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D006s01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ralph P. Rish

Mailing Address

450 Blake Drive

City

Wewahitchka

State

FL

Zip Code

32465

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D000U01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Adrien A. Rivard

Mailing Address

P. O. Box 461

City

Panama City

State

FL

Zip Code

32402

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary ☒ General
☐ Other (specify): ▼

State:

District:

Transaction ID: D006r01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

7400.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 17

☐ 17	☐ 18	☐ 19a	
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Cena M. Salmon

Mailing Address

10 Stockton Drive

City

Merritt Island

State

FL

Zip Code

32952

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00St01

Date of Disbursement

05	14	2004
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53**B. Mark Salmon**

Mailing Address

10 Stockton Drive

City

Merritt Island

State

FL

Zip Code

32952

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D00Su01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53**C. B. W. Simpkins**

Mailing Address

400 High Point Drive, #500

City

Cocoa

State

FL

Zip Code

32926

Purpose of Disbursement

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D007b01

Date of Disbursement

05	14	2004
----	----	------

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

79600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 17

☐ 17	☐ 18	☐ 19a	☐ 21
☒ 20a	☐ 20b	☐ 20c	

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Kraig Smith

Mailing Address

P. O. Box 639

City

Oakland

State

FL

Zip Code

34760

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D004M01

Date of Disbursement:

05

14

2004

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Melissa B. Spruce

Mailing Address

5060 Chardonnay Drive

City

Coral Springs

State

FL

Zip Code

33067

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D003S01

Date of Disbursement:

05

14

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. William D. Spruce

Mailing Address

5060 Chardonnay Drive

City

Coral Springs

State

FL

Zip Code

33067

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

State:

District:

Transaction ID: D003R01

Date of Disbursement:

05

14

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

84100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 17

☐ 17	☐ 18	☐ 19a	
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Dawn T. Strawn

Mailing Address

3547 Betty Ford Road

City

Murfreesboro

State

TN

Zip Code

37130

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

Transaction ID: D00TK01

Date of Disbursement

05 /

14 /

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Steven A. Strawn

Mailing Address

3547 Betty Ford Road

City

Murfreesboro

State

TN

Zip Code

37130

Purpose of Disbursement
contribution refund

Candidate Name

22Y

Category/
Type

Office Sought:

State:

District:

Disbursement For:

☐ Primary☒ General☐ Other (specify): ▼

Transaction ID: D00TJ01

Date of Disbursement

05 /

14 /

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

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

4000.00

88100.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

☐ 17	☐ 18	☐ 19a	☐ 21
☐ 20a	☐ 20b	☒ 20c	

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NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

Full Name (Last, First, Middle Initial)

A. Fla. Transportation Builders Assoc. PAC

Mailing Address

1007 Desoto Park Drive, #200

City

Tallahassee

State

FL

Zip Code

32301

Purpose of Disbursement
contribution refund

Candidate Name

22R

Category/
Type

Office Sought:

Disbursement For:

☐ Primary	☒ General
☐ Other (specify): ▼	

State:

District:

Transaction ID: D002101

Date of Disbursement

05

14

2004

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excessive
Contributions Required under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00

**SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS**(Use separate
schedule(s)
for each
numbered line)

PAGE 1 OF 2

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10**Excluding Loans**

NAME OF COMMITTEE (In Full)

Daniel Webster for U.S. Senate

C00390120

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ray Olech

Nature of Debt (Purpose):

media consulting

Mailing Address

7027 Ardis Street

City

Orlando

State

FL

Zip Code

32835

Outstanding Balance Beginning This Period

1550.00

Amount Incurred This Period

0.00

Payment This Period

1550.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tensor Engineering

Nature of Debt (Purpose):

air travel 3/30/04

Mailing Address

2060 S. Patrick Drive

City

Indian Harbour Bch

State

FL

Zip Code

32937

Outstanding Balance Beginning This Period

1094.00

Amount Incurred This Period

0.00

Payment This Period

1094.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Advantage Consultants

Nature of Debt (Purpose):

direct mail services

Mailing Address

3181 Maguire Blvd., #181

City

Orlando

State

FL

Zip Code

32803

Outstanding Balance Beginning This Period

3179.01

Amount Incurred This Period

0.00

Payment This Period

3179.01

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

2) **TOTALS** This Period (last page this line number only) ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS**(Use separate
schedule(s)
for each
numbered line)

PAGE 2 OF 2

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10**Excluding Loans**

NAME OF COMMITTEE (in Full)

Daniel Webster for U.S. Senate

C00390120

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Majority Strategies

Nature of Debt (Purpose):

direct mail services

Mailing Address

274 Marconi Blvd., #260

City

Columbus

State

OH

Zip Code

43215

Outstanding Balance Beginning This Period

14810.20

Amount Incurred This Period

0.00

Payment This Period

14810.20

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)**2) TOTALS** This Period (last page this line number only)**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only)**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

0.00

0.00

0.00

U.S. COMPANY
ACCOUNTANTS
CO. RTE. 100
IDA 28608



7003 1660 0005 4665 6764



1430 U.S. POSTAGE P6357029
0881 \$08.00 JUL 12 2004
8432 MAILED FROM ZIP CODE 33606

24020451432
24020451432



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SENATE POST OFFICE

X-RAYED
BY THE SENATE
POST OFFICE

S00005540
OFFICE OF PUBLIC RECORDS
P.O. BOX 5109
ALEXANDRIA, VA 22301-0109

04 JUL 15 PM 3:43
SECRETARY OF THE SENATE

EMILY J. REYNOLDS
SECRETARYPAMELA B. GAVIN
SUPERINTENDENTPART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

☐ HAND DELIVERED _____
Date of Receipt

☒ REGISTERED/CERTIFIED MAIL 07-12-04
Postmarked

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

☐ DELIVERY CONFIRMATION/ON LINE TRACKING SYSTEM

☐ PRIORITY MAIL /WITH CONFIRMATION SHEET

☐ EXPRESS MAIL

☐ FEDERAL EXPRESS

☐ UPS

☐ AIRBORNE EXPRESS _____
Postmark

☐ PRIORITY MAIL (NO CONFIRMATION) _____
Date of Receipt

☐ FIRST CLASS MAIL _____
Date of Receipt

☐ FAX _____
Date of Receipt

☐ NO POSTMARK ☐ POSTMARK ILLEGIBLE

☐ OTHER _____
Date of Receipt

RD 07-15-04
Preparer Date Prepared

24020451434
24020451434

