

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Florida-Federal Campaign Commi-  
tee

FEC IDENTIFICATION NUMBER  
**C** C00099259

Check if  24-hour notice  48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Campaign Data

Date

M N / D E / Y Y Y  
1 0 / 2 2 / 2 0 0 4

Mailing Address

999 Brickell Avenue  
Suite 700

Amount

19353.74

City State Zip Code  
Miami FL 33131-

Transaction ID: E54566

Purpose of Expenditure  
S direct mail

Category/  
Type

Office Sought: House State: 00  
Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
BUSH, GEORGE W

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1952589.08

Disbursement For: Primary  General  2004  
Other (specify): \_\_\_\_\_

Full Name (Last, First, Middle, Initial) of Payee

Campaign Data

Date

M N / D E / Y Y Y  
1 0 / 2 2 / 2 0 0 4

Mailing Address

999 Brickell Avenue  
Suite 700

Amount

7368.47

City State Zip Code  
Miami FL 33131-

Transaction ID: E54587

Purpose of Expenditure  
S direct mail post-a-  
ge

Category/  
Type

Office Sought: House State: 00  
Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
BUSH, GEORGE W

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1952589.08

Disbursement For: Primary  General  2004  
Other (specify): \_\_\_\_\_

(a) **SUBTOTAL** of Itemized Independent Expenditures ..... **26722.21**  
(b) **SUBTOTAL** of Unitemized Independent Expenditures ..... **0.00**  
(c) **TOTAL** Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Joel Pate  
Signature

Date M N / D E / Y Y Y  
0 5 / 1 2 / 2 0 0 5