REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee (Summary Page)

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	4173

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT 33 JAN 16 PH 1: 16 Friends of Connie Mack Check if different than previously reported. ADDRESS (number and street) FEC IDENTIFICATION NUMBER C00218230 610 S. Boulevard STATE/DISTRICT CITY, STATE and ZIP CODE 3. IS THIS REPORT AN AMENDMENT? Florida Tampa, FL 33606 4. TYPE OF REPORT 12-Day Pre-Election Report for the April 15 Quarterly Report (Type of Election) _ in the State of _ election on _ July 15 Quarterly Report 30-Day Post-Election Report for the October 15 Quarterly Report (Type of Election) __ in the State of . January 31 Year End Report July 31 Mid-Year Report (Non-election Year Only) **Termination Report** Runoff Election Special Election This report contains General Election X Primary Election activity for SUMMARY **COLUMN B COLUMN A** 12/31/97 Calendar Year-to-Date 7/01/97 This Period through Covering Period Net Contributions (other than loans) 618,214.09 404,729.29 Total Contributions (other than loans) (from Line 11(e)) (a) 19,200.00 11,100.00 Total Contribution Refunds (from Line 20(d)) (b) 599,014.09 393,629.29 Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) (c) 317,131.87 **Net Operating Expenditures** 186,575.86 Total Operating Expenditures (from Line 17) (a) 3,102.50 1,008.50 Total Offsets to Operating Expenditures (from Line 14) (b) 314,029.37 185,567.36 Net Operating Expenditures (subtract Line 7(b) from 7(a))..... 1,529,464.27 For further information Cash on Hand at Close of Reporting Period (from Line 27) contact: Federal Election Commission Debts and Obligations Owed TO the Committee -0-999 E Street, NW (Itemize all on Schedule C and/or Schedule D) . Washington, DC 20463 Debts and Obligations Owed BY the Committee -0-Toli Free 800-424-9530 10. (Itemize all on Schedule C and/or Schedule D) Local 202-219-3420 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 Robert I. Watkins Date Signature of Treasurer Jan 12, 1998 sion of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. **FEC FORM 3** (revised 4/87)

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DETAILED SUMMARY PAGE

of Receipts and Disbursements (Page 2, FEC FORM 3)

	Committee (in full)	Report Covering the Period	10/01/07
Name p	Committee (in full) iends of Connie Mack	From: 7/01/97	To: 12/31/97
	I. RECEIPTS	Total This Period	Calendar Year-To-Date
	11. CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(1) It wind (up Sahadula A)	247,117.01	* ////////////////////////////////////
	(ii) Uniterrized	48,612.28	
	The Table of post-inviting from individuals	295,729.29	497,189.23
	(b) Political Party Committees	-0-	-0
	(c) Other Political Committees (such as PACs)	109,000.00	121,024.86
	(c) Other Political Committees (such as PACS)	-0-	-0-
	(d) The Candidate(d) and (d))	404,729.29	618,214.09
	(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	anninininininininininininininininininin	
	12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	-0-	-0-
	13. LOANS:		
	(a) Made or Guaranteed by the Candidate	-	-0-
	(b) All Other Loans	-0-	-0-
	(c) TOTAL LOANS (add 13(a) and (b))	-0-	-0-
	14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1,008.50	3,102.50
			60,446.31
	15. OTHER RECEIPTS (Dividends, Interest, etc.)	31,933.56	00,440.31
	16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	437,671.35	681,762.90
	II. DISBURSEMENTS		
	17. OPERATING EXPENDITURES	186,575.86	317,131.87
	18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	-0-	-0-
	19. LOAN REPAYMENTS:		-0-
	(a) Of Loans Made or Guaranteed by the Candidate	-0-	-0-
	(b) Of All Other Loans	-0-	-0-
	(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
	20. REFUNDS OF CONTRIBUTIONS TO:	11,100.00	19,200.00
	(a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees	-0-	· -0-
	(b) Political Party Committees	-0- -0-	-0-
	(b) Political Party Committees	-0- -0- 11.100.00	-0- -0- 19,200.00
	(b) Political Party Committees	-0- -0- 11,100.00	- '-0- -0- 19,200.00
	(b) Political Party Committees	-0- -0- 11,100.00 	-0- -0- 19,200.00
	(b) Political Party Committees	-0- -0- 11,100.00 	- '-0- -0- 19,200.00
	(b) Political Party Committees	-0- -0- -11,100.00 	19,200.00 19,200.00 600.00
23. C/	(b) Political Party Committees — (c) Other Political Committees (such as PACs) — (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) — 21. OTHER DISBURSEMENTS — 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) — III. CASH SUMMARY	-0- -0- -11,100.00 	19,200.00 19,200.00 600.00
	(b) Political Party Committees — (c) Other Political Committees (such as PACs) — (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) — 21. OTHER DISBURSEMENTS — 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) — III. CASH SUMMARY ASH ON HAND AT BEGINNING OF REPORTING PERIOD —	-0- -0- 11,100.00 	0- -0- 19,200.00
24. TO	(b) Political Party Committees (c) Other Political Committees (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) III. CASH SUMMARY ASH ON HAND AT BEGINNING OF REPORTING PERIOD DTAL RECEIPTS THIS PERIOD (from Line 16)	-0- -0- 11,100.00 	- '-0- -0- 19,200.00
24. TO	(b) Political Party Committees (c) Other Political Committees (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) III. CASH SUMMARY ASH ON HAND AT BEGINNING OF REPORTING PERIOD DTAL RECEIPTS THIS PERIOD (from Line 16) UBTOTAL (add Line 23 and Line 24)	-0- -0- 11,100.00 	1,290,068.78 437,671.35 1,727,740.13
24. TO 25. SI 26. TO	(b) Political Party Committees (c) Other Political Committees (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) III. CASH SUMMARY ASH ON HAND AT BEGINNING OF REPORTING PERIOD DTAL RECEIPTS THIS PERIOD (from Line 16)	-0- -0- 11,100.00 	0- -0- 19,200.00

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ITEMIZED RECEIPTS

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

PAGE 1 OF 4 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
J. R. Abernathy 107 Country Club Drive, W.	n/a	7/21/97	100
Destin, FL 32541	Occupation		
Receipt For: X Primary Gen	retired		
Other (specify):	Aggregate Year-to-Date \$	300.00	Amount of Ea
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
J. R. Abernathy	n/a	11/10/97	100
107 Country Club Drive, W. Destin, FL 32541		11/10/9/	100
	Occupation retired		
Receipt For: Other (specify):	Aggregate Year-to-Date > \$	300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
Kevin D. Accola, M.D.		day, year)	Receipt this Pe
1365 Windsong Road	Cardio Surgeons, P.A.	10/30/97	1,000
Orlando, FL 32809	Occupation		
Receipt For: X Primary Ger	neral physician	1,000,00	
Other (specify):	Aggregate Year-to-Date > \$	1,000.00 Date (month,	Amount of E
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
John C. Adams	Hilb Rogal & Hamilton	9/22/97	25
P. O. Drawer 70 Daytona Beach, FL 32115			
	Occupation insurance agent		
Receipt For: Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
John C. Adams		day, year)	•
P. O. Drawer 70	Hilb Rogal & Hamilton	10/24/97	(25
Daytona Beach, FL 32115	Occupation		redesign
Medelpi i di.	neral insurance agent	1,000.00	
Other (specify):	Aggregate Year-to-Date > \$	Date (month,	Amount of E
F. Full Name, Mailing Address and ZIP Code John C. Adams	Name of Employer	day, year)	Receipt this P
P. O. Drawer 70	Hilb Rogal & Hamilton	10/24/97	25
Daytona Beach, FL 32115	<u> </u>		redesig
Receipt For: Primary X Ge	Occupation insurance agent		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this F
John C. Adams		day, year)	•
P. O. Drawer 70	Hilb Rogal & Hamilton	12/19/97	25
Daytona Beach, FL 32115	Occupation		
neceipt i of.	eneral insurance agent Aggregate Year-to-Date > \$	1 000 00	
Other (specify):	Aggregate real-to-bate / 5	1.000.00	

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

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) Friends of Connie Mack Amount of Each Name of Employer Date (month, A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John C. Adams (250.00)12/31/97 Hilb Rogal & Hamilton P. O. Drawer 70 reattributed Daytona Beach, FL 32115 Occupation General Receipt For: X Primary insurance agent Aggregate Year-to-Date > \$ 1.000.00 Other (specify): Amount of Each Name of Employer Date (month, B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Leila Adams 250.00 12/31/97 n/a P. O. Drawer 70 reattributed Daytona Beach, FL 32015 Occupation homemaker General X Primary Aggregate Year-to-Date 250.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John T. Adney 500.00 12/09/97 Davis & Harman 12347 Lima Lane Reston, VA 20191 Occupation attorney General Receipt For: X Primary Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mr. and Mrs. John R. Alexander 100.00 10/20/97 Ben Hill Griffin, Inc 327 Sunset Road Frostproof, FL 33843 Occupation accountant X Primary General Receipt For: Aggregate Year-to-Date 300.00 > \$ ς ' Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) C_{2} Mark J. Alkire, M.D. 1,000.00 11/04/97 self-employed 1112 Riverside Drive ~ Palmetto, FL 34221 Occupation physician X Primary General Receipt For: 00.000Aggregate Year-to-Date Other (specify): Date (month, Amount of Each Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Jim Anders 250.00 11/05/97 information requested P. O. Box 2300 Seagrove Beach, FL 32459 Occupation General information requested X Primary Receipt For: Aggregate Year-to-Date > \$ 250.00 Other (specify): Amount of Each Date (month, G. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Arthur I. Appleton 250.00 8/04/97 n/a 22 Indian Creek Island Miami Beach, FL 33154 Occupation X Primary General retired Receipt For: Aggregate Year-to-Date 250.00 Other (specify): SUBTOTAL of Receipts This Page (optional)

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

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 3 | 94
FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Robert R. Aronson		0,, ,00,	
4747 N. Ocean Blvd., #315	Ross Mfg. Corp.	7/29/97	400
Ft. Lauderdale, FL 33308	Occupation		
Receipt For: X Primary General	chairman & ceo Aggregate Year-to-Date > \$		
Other (specify):	7.99.032.0	1,600,00 Date (month,	Amount of E
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
Robert R. Aronson	1 5 5 6	7/00/07	60
4747 N. Ocean Blvd., #315	Ross Mfg. Corp.	7/29/97	00
Ft. Lauderdale, FL 33308	Occupation		
Receipt For: X Primary General	chairman & ceo Aggregate Year-to-Date > \$	1.600.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
C. Full Name, Mailing Address and ZIP Code	, sum or amproy or	day, year)	Receipt this P
Robert R. Aronson	Ross Mfg. Corp.	8/12/97	(20
4747 N. Ocean Blvd., #315			redesign
Ft. Lauderdale, FL 33308 Receipt For: X Primary General	Occupation & ceo		8
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1.600.00	
D. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month,	Amount of E
Robert R. Aronson		day, year)	Receipt this F
4747 N. Ocean Blvd., #315	Ross Mfg. Corp.	8/12/97	20
Ft. Lauderdale, FL 33308	Occupation		redesign
Receipt For: Primary X General	chairman & ceo		
Other (specify):	Aggregate Year-to-Date > \$	1,600.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Robert R. Aronson			-
4747 N. Ocean Blvd., #315	Ross Mfg. Corp.	10/22/97	60
Ft. Lauderdale, FL 33308	Occupation		
Receipt For: X Primary General	chairman & ceo	1 (00 00	
Other (specify):	Aggregate Year-to-Date \$	1,600.00	Amount of I
F. Fuil Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Robert R. Aronson	D 1/6- C	11/01/07	(6
4747 N. Ocean Blvd., #315	Ross Mfg. Corp.	11/21/97	redesig
Ft. Lauderdale, FL 33308	Occupation		Ignoria
Receipt For: X Primary General	chairman & ceo Aggregate Year-to-Date > \$	1.600.00	
Other (specify):		Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Robert R. Aronson	Ross Mfg. Corp.	11/21/97	6
4747 N. Ocean Blvd., #315			redesig
Ft. Lauderdale, FL 33308 Receipt For: Primary X General	occupation chairman & ceo		100001
Receipt For: Primary X General	Aggregate Year-to-Date > \$	1,600,00	
Other (specify):	Aggregate roan to bate		

ITEMIZED RECEIPTS

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

FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this I
Robert A. Assaf			٠
1619 Atlantic University Circle	Liberty Ambulance Svc	7/17/97	5
Jacksonville, FL 32207	Occupation		
Receipt For: Primary X General	OWNET Aggregate Year-to-Date > \$	500.00	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
Carol Atkinson		day, year)	Heceipt tills
P. O. Box 2462	Carol's Innocent Age	11/04/97	5
Panama City, FL 32402	Occupation	-	
Receipt For: X Primary General	owner		
Other (specify):	Aggregate Year-to-Date > \$	500.00	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Alfred S. Austin		10/04/07	5
4617 San Miguel	The Austin Companies	10/24/97	3
Tampa, FL 33629	Occupation		
Receipt For: Primary X General	developer Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
D. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this
Beverly A. Austin	n/a	10/24/97	5
4617 San Miguel	Occupation	_	
Tampa, FL 33629	homemaker		
Receipt For: Primary A General Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
R. Huston Babcock, M.D.			
2299 9th Avenue, N., #3D	self-employed	10/29/97	;
St. Petersburg, FL 33713	Occupation		
Receipt For: X Primary General	physician	1.000.00	
Other (specify):	Aggregate Year-to-Date > \$	1,300,00	Amount o
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
R. Huston Babcock, M.D.	16d	11/13/97	(
2299 9th Avenue, N., #3D	self-employed	11/13/97	redes
St. Petersburg, FL 33713	Occupation physician		10200
Receipt For: X Primary General	Aggregate Year-to-Date > \$	1,300.00	
Other (specify):	Name of Employer	Date (month,	Amount
G. Full Name, Mailing Address and ZIP Code R. Huston Babcock, M.D.	1	day, year)	Receipt thi
R. Huston Babcock, M.D. 2299 9th Avenue, N., #3D	self-employed	11/13/97	
St. Petersburg, FL 33713	Occupation		redes
Receipt For: Primary X General	physician		
Other (specify):	Aggregate Year-to-Date > \$	1,300,000	

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Pend
Richard R. Baker			
P. O. Box 12358	self-employed	9/29/97	500.0
Pensacola, FL 32582	Occupation		
Receipt For: Primary X General	real estate		
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
James T. Barnes, Jr.			500
7 Isle of Sicily	Osceola Financial	8/04/97	500.
Winter Park, FL 32789	Occupation		
Receipt For: Primary X General	banker		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Carol Jenkins Barnett			
5815 Live Oak Road	n/a	10/27/97	500.
Lakeland, FL 33813	Occupation	7	
Receipt For: X Primary General	housewife		
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Carol Jenkins Barnett			
5815 Live Oak Road	n/a	10/27/97	1,000
Lakeland, FL 33813	Occupation		
Receipt For: Primary X General	housewife		
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Hoyt R. Barnett			•
5815 Live Oak Road	Publix	10/27/97	500
Lakeland, FL 33813	Occupation		
Receipt For: X Primary General	vice-president		
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Hoyt R. Barnett			
5815 Live Oak Road	Publix	10/27/97	1,000
Lakeland, FL 33813	Occupation		
V Congrat	vice-president		
Receipt For: Primary A General Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
Michael A. Barody		day, year)	
14210 Coral Manor Drive	Southern Mgmt. Svcs.	8/14/97	500
Largo, FL 33774	Occupation		
	health care		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	1.500.00	
Auto (chanill).			

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

Friends of Connie Mack A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Mercy Bathey		Suy, year,	
4000 Gordon Drive	n/a	7/30/97	100
Naples, FL 34102	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	300.00	Amount of Ea
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
Robert M. Beall, II			4 000
P. O. Box N	Beall's	7/17/97	1,000
Bradenton, FL 34206	Occupation		
Receipt For: Primary X Gene			
Other (specify):	Aggregate Year-to-Date \$	1.000.00	Amount of Ea
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
Robert M. Beall, II			2.000
P. O. Box N	Beall's	10/22/97	2,000
Bradenton, FL 34206	Occupation		
Receipt For: X Primary Gen		1,000,00	
Other (specify):	riggiogato remine z	1,000,00 Date (month,	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pe
Joseph L. Bean		0000	10
139 Ponte Vedra Blvd., Box 1275	n/a	9/22/97	100
Ponte Vedra Beach, FL 32082	Occupation		
Receipt For: X Primary Ger	retired Aggregate Year-to-Date > \$	250.00	
Other (specify):		Date (month,	Amount of E
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
Richard A. Beard, III	D. A. Doord Co.	10/29/97	1,00
4417 Bayshore Blvd.	R. A. Beard Co.	10/23/37	1,00
Tampa, FL 33611	Occupation		
Heceipt For.	OWNET Aggregate Year-to-Date > \$	1,000.00	
Other (specify):		Date (month,	Amount of E
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
Richard A. Beard, III	R. A. Beard Co.	11/17/97	(50
4417 Bayshore Blvd.		11111171	redesig
Tampa, FL 33611	Occupation		icacaigi
Heceipt Fol:	neral OWNCT Aggregate Year-to-Date \$	1.000.00	
Other (specify):		Date (month,	Amount of E
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this F
Richard A. Beard, III	D. A. Doord Co.	11/17/97	50
4417 Bayshore Blvd.	R. A. Beard Co.	11/1///	redesig
Tampa, FL 33611	Occupation		iaus
Leceipt of:	neral OWNCT Aggregate Year-to-Date > \$	1 000 00	
Other (specify):			

ITEMIZED RECEIPTS

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

of 94 FOR LINE NUMBER

A. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac Receipt this Peri
R. William Becker		day, year)	neceipt dis Fen
P. O. Box 12190	Becker Trading Co.	7/21/97	1,000.
Ft. Pierce, FL 34979	Occupation		
Receipt For: X Primary General	citrus		
Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
R. William Becker		day, year/	ricocipi ano i
P. O. Box 12190	Becker Trading Co.	8/11/97	(500.
Pt. Pierce, FL 34979	Occupation		redesigna
Receipt For: X Primary Genera	 -		
Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac Receipt this Per
R. William Becker		day, year)	December and con
P. O. Box 12190	Becker Trading Co.	8/11/97	500
Ft. Pierce, FL 34979	Occupation		redesigna
Receipt For: Primary X Genera	,		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac Receipt this Pe
Anne N. Beckstein		day, year)	neceipt this rei
7418 Westmoreland Drive	Visitech	8/29/97	1,000
Sarasota, FL 34243	Occupation	 	
Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZiP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Eugene H. Beckstein		day, year)	
7418 Westmoreland Drive	Visitec Co.	8/29/97	1,000
Sarasota, FL 34243	Occupation		
Receipt For: Primary X General	 -		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Allan G. Bense		day, year)	•
P. O. Box 2462	Panhandle Consultants	11/04/97	2,000
Panama City, FL 32402	Occupation		
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Allan G. Bense		day, year)	neceipi uiis re
P. O. Box 2462	Panhandle Consultants	11/17/97	(1,00
Panama City, FL 32402	Occupation		redesign
Receipt For: X Primary Gener	a` a		
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	
Culci (openis)			

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Allan G. Bense		Gay, year,	
P. O. Box 2462	Panhandle Consultants	11/17/97	1,0
Panama City, FL 32402	Occupation		redesig
Receipt For: Primary X General	developer Aggregate Year-to-Date > \$		
Other (specify):	1.55.5	2,000.00	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Wayne L. Berman		10/10/07	1.0
1800 K Street, N.W., Suite 1124	Berman Enterprises	12/12/97	1,0
Washington, D.C. 20006	Occupation		
Receipt For: X Primary General	Consultant Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employee	day, year)	Receipt this
Luis N. Bessone, M.D.	Rupello-Bissone-Hiro	10/29/97	1,0
2814 W. Virginia Avenue		10/25/5/	-,
Tampa, FL 33607	Occupation physician		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Cyrus G. Bispham, Sr.		day, year)	Receipt this
7000 Ibis Street	self-employed	11/04/97	
Sarasota, FL 34241	Occupation		
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt thi
Virginia M. Bonness			
1555 Ixora Drive	n/a	10/10/97	2,
Naples, FL 34102	Occupation		
Receipt For: X Primary Genera			
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	A-cust of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt thi
Virginia M. Bonness	1.75	11/13/97	(1,
1555 Ixora Drive	n/a	11/15/9/	redes
Naples, FL 34102	Occupation		1000
Receipt For: X Primary Genera	homemaker Aggregate Year-to-Date > \$	2.000.00	
Other (specify):	Name of Employer	Date (month,	Amount
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt th
Virginia M. Bonness	n/a	11/13/97	1
1555 Ixora Drive			redes
Naples, FL 34102	Occupation homemaker		1000
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	2,000,00	
Other (specify).			

ITEMIZED RECEIPTS

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

PAGE 9 FOR LINE NUMBER

E OF COMMITTEE (in Full)			
Friends of Connie Mack		····	
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Guy Bostick	i I		
P. O. Box 67	Comcar Industries	7/21/97	1,00
Auburndale, FL 33823	Occupation		
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Guy Bostick		044400	(1.0
P. O. Box 67	Comcar Industries	8/14/97	(1,0
Auburndale, FL 33823	Occupation		redesig
Receipt For: X Primary Gene		1.500.00	
Other (specify):	Aggregate Year-to-Date \$	1.500.00 Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Guy Bostick		0/1 4/07	1,0
P. O. Box 67	Comcar Industries	8/14/97	redesig
Auburndale, FL 33823	Occupation		redesig
Receipt For: Primary X General	ral Chairman Aggregate Year-to-Date > \$	1.500.00	
Other (specify):		Date (month,	Amount of
D. Fuil Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
W. W. Boyd	16 1 1	8/08/97	2
P. O. Box 1147	self-employed	0/00/9/	2
Tallahassee, FL 32302	Occupation		
Receipt For: X Primary Gene	erat mechanical engineer Aggregate Year-to-Date > \$	950.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	name of employer	day, year)	Receipt this
W. W. Boyd	self-employed	10/08/97	1
P. O. Box 1147			-
Tallahassee, FL 32302	Occupation eral mechanical engineer		
Receipt For: X Primary Gene Other (specify):	Aggregate Year-to-Date > \$	950.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
W. W. Boyd		day, year)	Receipt this
P. O. Box 1147	self-employed	10/24/97	1
Tallahassee, FL 32302	Occupation		
Receipt For: X Primary General Control of the Contr			
Heceipt For: Other (specify):	Aggregate Year-to-Date > \$	950.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
W. W. Boyd		day, year)	
P. O. Box 1147	self-employed	11/15/97	(2
Tallahassee, FL 32302	Occupation		redesi
	eral mechanical engineer		
Other (specify):	Aggregate Year-to-Date > S	950.00	
BTOTAL of Receipts This Page (optional)			

ITEMIZED RECEIPTS

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

FOR LINE NUMBER

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.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. W. Boyd		44,,,64,,	
P. O. Box 1147	self-employed	11/15/97	200.0
Tallahassee, FL 32302	Occupation		redesignate
Receipt For: Primary X General	mechanical engineer		
Other (specify):	Aggregate Year-to-Date > \$	950.00	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Perio
John W. Boyle			100 /
7 N. Pine Circle	n/a	9/25/97	100.0
Belleair, FL 34616	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	(00.00	
Other (specify):		600.00 Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pend
John W. Boyle		10/16/07	(100.
7 N. Pine Circle	n/a	10/16/97	redesignat
Belleair, FL 34616	Occupation		ICICIIgiza
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	600.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
John W. Boyle		10/16/97	100
7 N. Pine Circle	n/a	10/10/9/	redesigna
Belleair, FL 34616	Occupation		raaigi
Receipt For: Primary X General	retired Aggregate Year-to-Date > \$	600.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
E. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Per
Norman Braman	Braman Mgmt. Assoc.	10/27/97	1,000
One S.E. Third Avenue, Suite 2130	Occupation		
Miami, FL 33131 Receipt For: X Primary General	auto dealer		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac
Norman Braman		day, year)	Receipt this Per
One S.E. Third Avenue, Suite 2130	Braman Mgmt. Assoc.	11/20/97	(500
Miami, FL 33131	Occupation		redesign:
Receipt For: X Primary General	auto dealer		
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G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Norman Braman		day, year)	•
One S.E. Third Avenue, Suite 2130	Braman Mgmt. Assoc.	11/20/97	500
Miami, FL 33131	Occupation		redesign
Receipt For: Primary X General	auto dealer		
Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
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ITEMIZED RECEIPTS

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FOR LINE NUMBER 11ai

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) Friends of Connie Mack Date (month, Amount of Each Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Norman Braman (500.00)12/15/97 Braman Mgmt. Assoc. One S.E. Third Avenue, Suite 2130 reattributed Miami, FL 33131 Occupation X Primary Receipt For: auto dealer Aggregate Year-to-Date S 8 1,000,00 Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Irma Braman 500.00 12/15/97 n/a One S.E. Third Avenue, Suite 2130 reattributed Miami, FL 33131 Occupation General none X Primary Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) W. E. Bright 1,000.00 7/16/97 n/a 1901 Bay Road, #303 Vero Beach, FL 32963 Occupation X General retired Primary Receipt For: Aggregate Year-to-Date .000.000Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John C. Brock, M.D. 2,000.00 11/04/97 Pupello, Bessone 3023 Fair Oaks Avenue Tampa, FL 33611 Occupation physician X Primary General Receipt For: Aggregate Year-to-Date 2,000,00 Other (specify): Amount of Each Name of Employer Date (month, E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John C. Brock, M.D. 11/17/97 (1,000.00)Pupello, Bessone 3023 Fair Oaks Avenue redesignated Tampa, FL 33611 Occupation physician General X Primary Receipt For: 2.000.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Malling Address and ZIP Code Receipt this Period day, year) John C. Brock, M.D. 1,000.00 11/17/97 Pupello, Bessone 3023 Fair Oaks Avenue redesignated Tampa, FL 33611 Occupation X General physician Receipt For: Primary Aggregate Year-to-Date 2.000.00 Other (specify): Amount of Each Date (month, G. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Michael D. Bromberg 1,000.00 10/31/97 Deborah Stealman 2101 Connecticut Avenue, #35 Washington, D.C. 20008 Occupation X Primary attorney General Receipt For: Aggregate Year-to-Date 000.00Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 12 | 94 FOR LINE NUMBER

Robert J. Brueck, M.D. 25 Falconwood Court Ft. Myers, FL 33919 Self-employed	Friends of Connie Mack A. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
Receipt For: X Primary General Aggregate Year-to-Date S O.OO	Robert J. Brueck, M.D. 25 Falconwood Court	self-employed		1,00
B. Full Name, Mailing Address and ziP Code Robert J. Brueck, M.D. 25 Falcomwood Court Ft. Myers, FL 33919 Receipt For: X Primary General Primary General Page and Primary General Page and Primary General Primary Gene	Receipt For: X Primary General	physician	0.00	
Receipt fier: C. Full Name, Mailing Address and ZIP Code Mary W. Bruck 25 Falconwood Court Ft. Myers, Ft. 33919 Receipt fier: C. Full Name, Mailing Address and ZIP Code Mary W. Bruck 25 Falconwood Ft. Myers, Ft. 33919 Receipt fier: C. Full Name, Mailing Address and ZIP Code Mary W. Bruck 25 Falconwood Ft. Myers, Ft. 33919 Receipt fier: Coupation Primary Coupation Name of Employer Name of Employ			Date (month,	Amount of E
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C. Full Name, Mailing Address and ZIP Code Mary W. Brueck 25 Falconwood Ft. Myers, FL 33919 Receipt For: D. Full Name, Mailing Address and ZIP Code John J. Brunetti S4 Bay Bay Drive Bal Harbour, FL 33154 Receipt For: Dother (specity): E. Full Name, Mailing Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Dither (specity): Drimary General Seneral Aggregate Year-to-Date Self-employed Self-				
C. Full Name, Malling Address and ZIP Code Mary W. Brueck 25 Falconwood Ft. Myers, FL 33919 Receipt For: Other (specify):	necept of.		0.00	
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Dother (specify): Aggregate Year-to-Date S 1,000.00		1 -		
D. Full Name, Malling Address and ZIP Code John J. Brunetti 54 Bay Bay Drive Bal Harbour, FL 33154 Receipt For: Other (specity): F. Full Name, Malling Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specity): F. Full Name, Malling Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specity): F. Full Name, Malling Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specity): Primary General Occupation portfolio manager Aggregate Year-to-Date Premier Inv. Mgmt. Premier Inv. Mgmt. T/13/97 Amount of Receipt the day, year) Amount of Receipt the day			1,000.00	
Brunetti Const. Co. Syledight Street Stre	D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
Bal Harbour, FL 33154 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Occupation portfolio manager Aggregate Year-to-Date > \$ 250.00 Date (month, day, year) Amount of Employer Aggregate Year-to-Date > \$ Cocupation portfolio manager Aggregate Year-to-Date > \$ Cocupation Beceipt For: Cocupation Date (month, 6/21/97) Aggregate Year-to-Date > \$ Cocupa	• • • • • • • • • • • • • • • • • • • •	Brunetti Const. Co.	9/26/97	5
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Other (specify): Aggregate Year-to-Date \$ 500.00		builder		
Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Alicia A. Bryan 1847 Bayou Grande Blvd., N.E. St. Petersburg, FL 33703 Receipt For: Other (specify): Primary X General Other (specify): Premier Inv. Mgmt. 7/13/97 Amount of Employer Aggregate Year-to-Date Premier Inv. Mgmt. 7/13/97 Premier Inv. Mgmt. 7/13/97 Amount of Employer Aggregate Year-to-Date S 250.00 Receipt For: Occupation portfolio manager Aggregate Year-to-Date Aggregate Year-to-Date S 250.00 Date (month, 6/21/9/1) Amount of Employer Aggregate Year-to-Date S 250.00 Receipt For: Aggregate Year-to-Date S 250.00 Date (month, 6/21/9/1) Amount of Employer Bryan Homes Occupation Tredes Occupation Bryan Homes Occupation General Receipt For: X Primary General General Occupation General Occupation Amount of Employer Aggregate Year-to-Date S 250.00 Date (month, 6/21/9/1) Amount of Employer Cocupation General Occupation Amount of Employer Aggregate Year-to-Date Aggregate Year-to-Date S 250.00 Amount of Employer Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date S 250.00 Date (month, 6/21/9/1) Amount of Employer Aggregate Year-to-Date Aggregate Year-		Aggregate Year-to-Date > \$		
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ITEMIZED RECEIPTS

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A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
John W. Bryan 1847 Bayou Grande Blvd., N.E.		Bryan Homes	7/14/97	250
St. Petersburg, FL 33703		Occupation		redesign
Receipt For: Primary Other (specify):	X General	developer Aggregate Year-to-Date > \$	250.00	
B. Full Name, Mailing Address and ZiP Code		Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Hardy W. Bryan, III		Northside Realty	10/27/97	500
766 35th Avenue, N. St. Petersburg, FL 33704		Occupation	- I	
Receipt For: X Primary	General	realtor		
Other (specify):		Aggregate Year-to-Date \$	1.000.00 Date (month.	Amount of E
C. Full Name, Mailing Address and ZIP Code		Name of Employer	day, year)	Receipt this P
Hardy W. Bryan, III 766 35th Avenue, N.		Northside Realty	11/17/97	(50
St. Petersburg, FL 33704		Occupation		redesign
Receipt For: X Primary	General	realtor Aggregate Year-to-Date > \$	1.000.00	
Other (specify): D. Full Name, Malling Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of E
Hardy W. Bryan, III				·
766 35th Avenue, N.		Northside Realty	11/17/97	50 redesign
St. Petersburg, FL 33704	X General	Occupation		raus
Receipt For: Primary Other (specify):	A General	Aggregate Year-to-Date > \$	1,000,00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of E Receipt this F
David J. Burke		self-employed	11/04/97	25
17070 Ranho Street Encino, CA 91316		Occupation Occupation		
Receipt For: X Primary	General	film maker		
Other (specify):		Aggregate Year-to-Date > \$	0.00	Amount of I
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Receipt this I
Janet Hawthorne Burnett P. O. Box 350854		n/a	12/12/97	1,00
Palm Grove, FL 32135		Occupation		
Receipt For: X Primary	General	homemaker Aggregate Year-to-Date > \$	1.000.00	
Other (specify):		Aggregate Year-to-Date > \$ Name of Employer	Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code Wesley L. Burnham		Marie of Emblodo	day, year)	Receipt this
11212 Front Beach Road		self-employed	11/04/97	5
Panama City Beach, FL 32407		Occupation		
Receipt For: X Primary	General	real estate Aggregate Year-to-Date > \$	500.00	

ITEMIZED RECEIPTS

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

PAGE 14 OF 94
FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Mary O. Bush	n/a	8/11/97	2:
P. O. Box 1546		- 0/11/5/	
Hobe Sound, FL 33455 Receipt For: X Primary General	Occupation homemaker		
Receipt For: X Primary General	Aggregate Year-to-Date \$	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this
Mary O. Bush			
P. O. Box 1546	n/a	10/30/97	
Hobe Sound, FL 33455	Occupation		
Receipt For: X Primary General	homemaker Aggregate Year-to-Date > \$	250.00	
Other (specify): C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of I
Mary O. Bush		day, year)	Receipt this
P. O. Box 1546	n/a	11/02/97	(
Hobe Sound, FL 33455	Occupation	-	redesig
Receipt For: X Primary General	homemaker		
Other (specify):	Aggregate Year-to-Date > \$	250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Mary O. Bush		11/02/07	
P. O. Box 1546	n/a	11/02/97	redesig
Hobe Sound, FL 33455	Occupation homemaker		Icnesis
Receipt For: Primary X General	Aggregate Year-to-Date > \$	250.00	
Other (specify): E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
John P. Byrnes		day, year)	Receipt this
510 Old Oak Circle	Lincare Holdings	11/04/97	1,0
Palm Harbor, FL 34683	Occupation	-	
Receipt For: X Primary General	chief exec. officer		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
C.C. Limited Partnership	7/2	10/24/97	5
4229 Highway 90	n/a	- 10,24,31	-
Pace, FL 32571	Occupation partnership		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Edwin A. Henry		day, year)	Receipt this
5020 San Pedro Court	Henry Company Homes	10/24/97	(2
Milton, FL 32583	Occupation		
Receipt For: X Primary General	general contractor		
Other (specify):	Aggregate Year-to-Date > \$	750.00	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 15 OF 94
FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Susan A. Henry			
5020 San Pedro Court	Henry Company Homes	10/24/97	(25
Milton, FL 32583	Occupation		m
Receipt For: X Primary General	bookkeeper Aggregate Year-to-Date > \$	750.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
B. Full Name, Mailing Address and ZIP Code	realis s. Employs.	day, year)	Receipt this P
Robert Cade	self-employed	9/15/97	50
529 N.W. 58th Street Gainesville, FL 32607		_	
T#1 = 1 Occupy	Occupation developer		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	0.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this F
Robert Cade		day, year)	
529 N.W. 58th Street	self-employed	10/28/97	50
Gainesville, FL 32607	Occupation	-	
Receipt For: Primary X General	developer		
Other (specify):	Aggregate Year-to-Date > \$	0.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this E
William L. Carter		510.4/05	1/
634 Wildwood Lane	n/a	7/24/97	10
Naples, FL 34105	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	300.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Warren M. Cason	Holland & Knight	10/28/97	1,0
P. O. Box 1288 Tampa, FL 33601	Occupation		·
Receipt For: X Primary General	attorney		
Cther (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Sidney Charles P. O. Box 695549	Allstate Insurance	11/04/97	5
Miami, FL 33269	Occupation		
Receipt For: X Primary General	insurance Aggregate Year-to-Date > \$	1,000,00	
Other (specify):		Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code Sidney Charles	Name of Employer	day, year)	Receipt this
P. O. Box 695549	Allstate Insurance	11/26/97	(2 modesis
Miami, FL 33269	Occupation		redesi
Receipt For: X Primary General	insurance Aggregate Year-to-Date > \$	1,000,00	
Other (specify):	Aggregate rear to bate	1-11111	
BTOTAL of Receipts This Page (optional)		>	

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

Friends of Connie Mack	Name of Employer	Date (month,	Amount of Ea
A. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Pe
Sidney Charles	A Waterto Torresponde	11/26/97	250
P. O. Box 695549	Allstate Insurance	11/20/97	redesign
Miami, FL 33269	Occupation		ICICIE
Receipt For: Primary X G	eneral insurance Aggregate Year-to-Date > \$	1,000,00	
B. Fuil Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Margaret Christopher		day, year,	
3932 Riverview Blvd.	self-employed	10/29/97	1,00
Bradenton, FL 34209	Occupation		
	interior design		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
David R. Clare			•
972 Lake House Drive	n/a	7/30/97	50
North Palm Beach, FL 33408	Occupation		
	ieneral retired		
Other (specify):	Aggregate Year-to-Date > \$	500.00	A
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
John M. Clarke, M.D.			00
7171 9th Street, S.	John M. Clarke, MD PA	7/21/97	30
St. Petersburg, FL 33705	Occupation		
Receipt For:	General physician Aggregate Year-to-Date > \$	(20.00	
Other (specify):	riggiogati value	630,00 Date (month,	Amount of E
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this I
Jack F. Clatting	Classica Tarlana etcl	11/04/97	5(
105 Red Bay Drive	Glatting Jackson etal	11/04/9/	
Longwood, FL 32779	Occupation		
Receipt For.	General community planning Aggregate Year-to-Date > \$	500.00	
Other (specify):		Date (month,	Amount of 1
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this I
Guernsey C. Cline		8/04/97	5
2950 Polo Drive	n/a	O/U+/7/	
Gulfstream, FL 33483	Occupation		
Theodoparton.	General retired Aggregate Year-to-Date \$	500.00	
Other (specify):		Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Stephen V. Coffman	II C Cyana Com	12/12/97	2
P. O. Box 298	U.S. Sugar Corp.		
Clewiston, FL 33440	Occupation occupant		
Receipt For: X Primary	General asst. secretary Aggregate Year-to-Date > \$	250.00	
Other (specify):	1 33 3		
BTOTAL of Receipts This Page (optional)			1

ITEMIZED RECEIPTS

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

PAGE 17 OF 94 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Hal D. Condrey			•
P. O. Box 8396	Comm Iron & Metals Co	9/24/97	1,000
Orlando, FL 32806	Occupation		
Receipt For: X Primary General	scrap metal recycling Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
B. Full Name, Mailing Address and ZIP Code	Nume of Employor	day, year)	Receipt this P
Hal D. Condrey	Comm Iron & Metals Co	10/01/97	(1,00
P. O. Box 8396		10/01/5/	reattrib
Orlando, FL 32806	occupation scrap metal recycling		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this F
Mary Jean Condrey		day, year)	Hereiht mis t
P. O. Box 8396	n/a	10/01/97	1,00
Orlando, FL 32806	Occupation	┥	reattri
Receipt For: X Primary General	homemaker		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this I
Joe B. Cox			• •
3001 N. Tamiami Trail, 4th Floor	Cummings and Lockwood	11/04/97	1,00
Naples, FL 34103	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	1.000.00	
Other (specify):		Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
William C. Cramer, Jr.	Thomas Chevrolet	8/11/97	5
P. O. Box 490			J
Panama City, FL 32402	Occupation general manager		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Jeff Crawford, Jr.			•
4657 Highway 71	self-employed	7/22/97	1
Greenwood, FL 32443	Occupation	ヿ !	
Receipt For: X Primary Genera			
Other (specify):	Aggregate Year-to-Date > \$	300.00	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Jayne S. Crews	10 1	705107	2
900 Campbell Avenue	self-employed	7/25/97	2
Lake Wales, FL 33853	Occupation		
Receipt For: X Primary General Other (specify):	artist Aggregate Year-to-Date > \$	250.00	
	1.000		

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11ai

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Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Jack B. Critchfield			
P. O. Box 33042	Florida Progress Corp	9/19/97	250.
St. Petersburg, FL 33733	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	250.00	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Per
Earl M. Crittenden			
1023 Pinar Drive	Crittenden Fruit Co.	10/31/97	1,000
Orlando, FL 32825	Occupation		
Receipt For: Primary X Gen			
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
L. E. Crittenden			
3976 Cordova Avenue	n/a	9/18/97	950
Jacksonville, FL 32207	Occupation	 	
Receipt For: Primary X Gen	eral retired		
Other (specify):	Aggregate Year-to-Date > \$	1,450.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
James D. Cronley		,,,,	•
3840 Hopkins Street	Terharr-Cronley	11/17/97	500
Pensacola, FL 32505	Occupation		
	neral construction		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
James D. Cronley		day, year,	
3840 Hopkins Street	Terharr-Cronley	12/28/97	(500
Pensacola, FL 32505	Occupation		redesign
·	neral construction		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
James D. Cronley		day, year)	
3840 Hopkins Street	Terharr-Cronley	12/28/97	50
Pensacola, FL 32505	Occupation		redesign
	neral construction		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
Kenneth Curtis		day, year)	•
3785 Ft. Denaud Road	HC Financial Corp.	7/24/97	10
La Belle, FL 33935	Occupation		
	eneral president		
Receipt For: X Primary Ge	Aggregate Year-to-Date > \$	400.00	
Anna debasedly			"

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ITEMIZED RECEIPTS

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

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Detailed Summary Page FOR LINE NUMBER

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E OF COMMITTEE (in Full)			
Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Kenneth Curtis			
3785 Ft. Denaud Road	HC Financial Corp.	10/14/97	100
La Belle, FL 33935	Occupation		
Receipt For: X Primary General	president		
Other (specify):	Aggregate Year-to-Date S	400.00	Amount of Ea
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
James J. Cusack		11/04/07	500
501 E. Kennedy Blvd., Suite 1200	self-employed	11/04/97	50.
Tampa, FL 33602	Occupation		
Receipt For: X Primary General	attorney Aggregate Year-to-Date > \$	1.000.00	
Other (specify):		Date (month,	Amount of E
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
James J. Cusack	anl6 ammlayed	11/04/97	50
501 E. Kennedy Blvd., Suite 1200	self-employed		
Tampa, FL 33602	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E Receipt this F
D. Full Name, Mailing Address and ZIP Code	1	day, year)	necespt time :
George G. Daniels	Daniels Mfg. Corp.	10/14/97	1,00
P. O. Box 590007	Occupation		
Orlando, FL 32859	executive		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of l Receipt this
Thomas A. Davis			1 5
1455 Pennsylvania Ave., N.W., #1200	Davis and Harman	12/09/97	1,5
Washington, D.C. 20004	Occupation		
Receipt For: X Primary General	attorney	1 400 00	
Other (specify):	Aggregate Year-to-Date > \$	1,400.00	Amount of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Thomas A. Davis		12/29/97	(1,0
1455 Pennsylvania Ave., N.W., #1200	Davis and Harman		redesi
Washington, D.C. 20004	Occupation		1000
Receipt For: X Primary General	Aggregate Year-to-Date > \$	1,400,00	
Other (specify):		Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Thomas A. Davis	Davis and Hamson	12/29/97	1,0
1455 Pennsylvania Ave., N.W., #1200	Davis and Harman		redesi
Washington, D.C. 20004	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date > \$	1 400 00	
Other (specify):			
JBTOTAL of Receipts This Page (optional)	***************************************		

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 20 OF 94 FOR LINE NUMBER

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Peri
Thomas A. Davis		day, year)	Deceibt and Len
1455 Pennsylvania Ave., N.W., #1200	Davis and Harman	12/30/97	(100
Washington, D.C. 20004	Occupation	-	reattribu
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	1,400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
June Davis 1455 Pennsylvania Ave., N.W., #1200	n/a	12/30/97	100
Washington, D.C. 20004	Occupation		reattribu
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	100.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
William A. Davis P. O. Drawer 550	self-employed	7/21/97	200
Ft. Walton Beach, FL 32549	Occupation		
Receipt For: X Primary General	real estate		
Other (specify):	Aggregate Year-to-Date > \$	400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
William A. Davis P. O. Drawer 550	self-employed	8/11/97	(100
Ft. Walton Beach, FL 32549	Occupation		redesigna
	real estate		J
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > S	400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
William A. Davis P. O. Drawer 550	self-employed	8/11/97	100
Ft. Walton Beach, FL 32549	Occupation		redesign
	real estate		J
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
C. E. Dekko 7261 Tildon Lane	Dri-Dek Corp.	7/16/97	1,00
Naples, FL 34108	Occupation	 	
Receipt For: Primary X General	executive		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Po
Frederick M. Derr P. O. Box 2719	Frederick Deer & Co.	11/10/97	50
Sarasota, FL 34230	Occupation		
Receipt For: X Primary General	contractor		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
BTOTAL of Receipts This Page (optional)			

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 21 OF 94 FOR LINE NUMBER

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A. Full Name, Mailing Address	ss and ZIP Code		Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Akshay Desai					
8498 Tallahassee Dri	ve, N.E.		Amer. Family & Ger.	11/04/97	1,0
St. Petersburg, FL 3			Occupation		
Receipt For:	X Primary	General	physician Aggregate Year-to-Date > \$		
Other (specify)				900 00 Date (month,	Amount of
B. Full Name, Mailing Addre	ss and ZIP Code		Name of Employer	day, year)	Receipt this
C. C. Dockery			asl6 ammlayed	7/16/97	7
P. O. Box 2805			self-employed	//10/9/	,
Lakeland, FL 3380			Occupation insurance executive		
Receipt For:	X Primary	General	Aggregate Year-to-Date > \$	1,250.00	
Other (specify C. Full Name, Mailing Addre			Name of Employer	Date (month,	Amount of
	iss and En. Oute			day, year)	Receipt this
C. C. Dockery P. O. Box 2805			self-employed	8/10/97	(5
Lakeland, FL 3380	6		Occupation		redesig
Receipt For:	X Primary	General	insurance executive		
Other (specify			Aggregate Year-to-Date > \$	1.250.00	
D. Full Name, Mailing Addre			Name of Employer	Date (month, day, year)	Amount of Receipt this
C. C. Dockery				563, 1661	
P. O. Box 2805			self-employed	8/10/97	
Lakeland, FL 3380	6		Occupation		redesi
Receipt For:	Primary	X General	insurance executive		
Other (specify	/):		Aggregate Year-to-Date > \$	1,250.00	Amount of
E. Full Name, Mailing Addre	ess and ZIP Code		Name of Employer	Date (month, day, year)	Receipt this
C. C. Dockery			-16	11/04/07	4
P. O. Box 2805			self-employed	11/04/97	•
Lakeland, FL 3380			Occupation		
Receipt For:	X Primary	General	insurance executive Aggregate Year-to-Date > \$	1,250.00	
Other (specification)			Name of Employer	Date (month,	Amount o
F. Full Name, Mailing Addr	ess and ZIP Code		rano or employer	day, year)	Receipt this
C. C. Dockery P. O. Box 2805			self-employed	11/12/97	(:
Lakeland, FL 3380)6		Occupation		redesi
Receipt For:	X Primary	General	insurance executive		
Other (specif			Aggregate Year-to-Date > \$	1,250.00	
G. Full Name, Mailing Add			Name of Employer	Date (month,	Amount o
C. C. Dockery				day, year)	
P. O. Box 2805			self-employed	11/12/97	
Lakeland, FL 338	06		Occupation		redes
Receipt For:	Primary	X General	insurance executive		
Other (speci	fy):		Aggregate Year-to-Date > \$	1.250.00	
BTOTAL of Receipts This P	N				

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ITEMIZED RECEIPTS

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

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Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
Jorge A. Dominicis		day, year)	Receipt this Po
274 Barcelona Road	Flo-Sun, Inc.	10/31/97	500
West Palm Beach, FL 33401	Occupation		
Receipt For: X Primary General	vice-president		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E
J. R. Donnell		Gay, year,	
300 Parc Monceau	n/a	11/05/97	40
Palm Beach, FL 33480	Occupation		
Receipt For: X Primary Genera			
Other (specify):	Aggregate Year-to-Date \$	600.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Po
J. R. Donnell		uay, year,	r
300 Parc Monceau	n/a	12/26/97	(40
Palm Beach, FL 33480	Occupation		redesign
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	600.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
J. R. Donnell			•
300 Parc Monceau	n/a	12/26/97	40
Palm Beach, FL 33480	Occupation		redesign
Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date > \$	600.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Alix F. Dorr			
644 Hudson Avenue	Thompson & Co.	10/29/97	1,00
Tampa, FL 33606	Occupation		
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Dallas W. Dort			**
3466 Gulf Mead Drive	n/a	10/03/97	10
Sarasota, FL 34242	Occupation		
Receipt For: X Primary Genera			
Other (specify):	Aggregate Year-to-Date > \$	400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Ronnie E. Duncan			
6522 Via Regina	Sevell & Duncan	10/24/97	1,00
Boca Raton, FL 33433	Occupation		
Receipt For: X Primary General		1 222 22	
Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
		<u> </u>	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 94
FOR LINE NUMBER

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) Friends of Connie Mack Amount of Each Date (month, A. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Ronnie E. Duncan (500.00)12/07/97 Sevell & Duncan 6522 Via Regina redesignated Boca Raton, FL 33433 Occupation General real estate Receipt For: X Primary Aggregate Year-to-Date 1,000,00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Malling Address and ZIP Code Receipt this Period day, year) Ronnie E. Duncan 500.00 Sevell & Duncan 12/07/97 6522 Via Regina redesignated Boca Raton, FL 33433 Occupation real estate X General Primary Receipt For: Aggregate Year-to-Date > \$.000.000Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mary M. Dunlap 100.00 10/09/97 n/a P. O. Box 430 La Belle, FL 33975 Occupation General homemaker X Primary Receipt For: Aggregate Year-to-Date > \$ 600.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mary M. Dunlap (100.00)11/14/97 n/a P. O. Box 430 redesignated La Belle, FL 33975 Occupation C homemaker X Primary General Receipt For: Aggregate Year-to-Date 600.00 **C**. Other (specify): Amount of Each Name of Employer Date (month, E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mary M. Dunlap 100.00 11/14/97 n/a P. O. Box 430 00 redesignated La Belle, FL 33975 Occupation X General homemaker Primary Receipt For: Aggregate Year-to-Date 600.00 Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Tully F. Dunlap 100.00 10/09/97 P. O. Box 430 n/a La Belle, FL 33975 Occupation retired X Primary General Receipt For: Aggregate Year-to-Date 600.00 Other (specify): Date (month, Amount of Each Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Tully F. Dunlap (100.00)11/14/97 P. O. Box 430 n/a redesignated Occupation La Belle, FL 33975 General retired Receipt For: X Primary Aggregate Year-to-Date 600.00Other (specify): SUBTOTAL of Receipts This Page (optional)

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

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 94 FOR LINE NUMBER

Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tully F. Dunlap			
P. O. Box 430	n/a	11/14/97	100.00
La Belle, FL 33975	Occupation		redesignated
Receipt For: Primary X General	retired Apprenate Year-to-Date > \$		
Other (specify):	//ggrogate version	600.00 Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
K. Earl Durden		11/04/07	1,000.00
1804 Weakfish Drive	Durden Leasing, Inc.	11/04/97	1,000.00
Panama City Beach, FL 32411	Occupation		
Receipt For: X Primary General	executive Appreciate Year-to-Date > \$	1,000,00	
Other (specify):	riggiogate tour to a training	1,000.00 Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
E. Llwyd Ecclestone, III	7 1 . 0'- 11	701/07	100.00
P. O. Box 3267	Ecclestone Sig. Homes	7/21/97	100.00
West Palm Beach, FL 33402	Occupation		
Receipt For: Primary X General	real estate Aggregate Year-to-Date > \$		
Other (specify):		600,00 Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
William P. Edwards		7/17/07	100.0
547 First Street, S.	self-employed	7/17/97	100.0
St. Petersburg, FL 33701	Occupation		
Receipt For: X Primary General	property management Aggregate Year-to-Date > \$	600.00	
Other (specify):		Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
William P. Edwards	10 11	8/22/97	(100.0
547 First Street, S.	self-employed	0/2/191	redesignate
St. Petersburg, FL 33701	Occupation		10000 GILLIN
Receipt For: X Primary General	property management Aggregate Year-to-Date > S	600.00	
Other (specify):		Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peno
William P. Edwards	- 16IA	8/22/97	100.0
547 First Street, S.	self-employed	0122191	redesignat
St. Petersburg, FL 33701	Occupation		10000gizza
Receipt For: Primary X General	property management Aggregate Year-to-Date > \$	600.00	
Other (specify):		Date (month,	Amount of Each
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
W. E. Elliott, Jr.	103	8/18/97	500.
P. O. Box 2828	self-employed	0/10/7/]
Pikeville, KY 41501	Occupation		
Receipt For: X Primary General	oil & gas producer Aggregate Year-to-Date > S	500.00	-

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 25 | 94
FOR LINE NUMBER 11ai

A. Full Name, Mailing Address and ZIP Code	N	lame of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Gregory C. Elwell 1645 Barber Road		McIntyre Doherty	10/14/97	500
Sarasota, FL 34240	-	Occupation		
	eneral	general contractor		
Other (specify):		Aggregate Year-to-Date > \$	1,000.00	1
B. Full Name, Mailing Address and ZiP Code	1	lame of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Gregory C. Elwell			10.00	500
1645 Barber Road		McIntyre Doherty	10/27/97	500
Sarasota, FL 34240		Occupation		
neceipt rot.	eneral	general contractor Aggregate Year-to-Date > \$	1 000 00	
Other (specify):			1,000.00 Date (month,	Amount of Ea
C. Full Name, Malling Address and ZIP Code		Name of Employer	day, year)	Receipt this Pe
Meryl F. Eriksson		m/o	0/24/07	1,000
7148 Estero Blvd., #321		n/a	9/24/97	1,000
Ft. Myers Beach, FL 33931		Occupation		
neceipt i oi.	eneral	retired Aggregate Year-to-Date > \$	900.00	
Other (specify):		Name of Employer	Date (month,	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	'		day, year)	Receipt this Pe
Meryl F. Eriksson		n/a	10/17/97	(40
7148 Estero Blvd., #321	<u> </u>		10/1////	redesign
Ft. Myers Beach, FL 33931		Occupation retired		10000.
Receipt For: X Primary G	General	Aggregate Year-to-Date > \$	900.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month,	Amount of Ea
Meryl F. Eriksson		, .	day, year)	Receipt this P
7148 Estero Blvd., #321		n/a	10/17/97	40
Ft. Myers Beach, FL 33931	-	Occupation		redesign
	General	retired		
Other (specify):	F	Aggregate Year-to-Date S	900.00	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month,	Amount of E Receipt this P
Meryl F. Eriksson			day, year)	•
7148 Estero Blvd., #321		n/a	10/24/97	20
Ft. Myers Beach, FL 33931	+	Occupation	-	
	General	retired		
Other (specify):		Aggregate Year-to-Date > \$	900.00	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Charles F. Faddis 6701 Pensacola Blvd.		Com-Land Group, Inc.	11/05/97	50
		Occupation		
Pensacola, FL 32505 Receipt For: X Primary G	General	developer		
Receipt For: X Primary C	· L	Aggregate Year-to-Date > \$	500.00	
One (eposity)				

ITEMIZED RECEIPTS

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

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<u>11ai</u>

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Charles F. Faddis		day, year,	Hecelpt and to
6701 Pensacola Blvd.	Com-Land Group, Inc	. 12/29/97	(250
Pensacola, FL 32505	Occupation		redesign
Receipt For: X Primary Gen	neral developer		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Charles F. Faddis		day, year,	
6701 Pensacola Blvd.	Com-Land Group, Inc	:. 12/29/97	250
Pensacola, FL 32505	Occupation		redesign
Receipt For: Primary X Ger	neral developer		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Fuil Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Richard M. Fairbanks		day, year)	11000.pt 1110
22 E. Snapper Point	Fairbanks Comm., Inc	c. 9/15/97	300
Key Largo, FL 33037	Occupation		
, ,	neral broadcasting		
Other (specify):	Aggregate Year-to-Date S	300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Richard M. Fairbanks		oay, year,	rieceipi tillo i
22 E. Snapper Point	Fairbanks Comm., Inc	c. 10/29/97	(30
Key Largo, FL 33037	Occupation		redesign
	neral broadcasting		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
Richard M. Fairbanks		day, year)	Heceipi illis i
22 E. Snapper Point	Fairbanks Comm., Inc	c. 10/29/97	30
Key Largo, FL 33037	Occupation		redesign
	eneral broadcasting		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
Dr. Frank S. Farkas	Į	day, year)	neceipt this r
1721 Brightwaters Blvd., N.E.	Wellcare Health Cntr.	. 11/04/97	2,00
St. Petersburg, FL 33704	Occupation		
	eneral chiropractor		
Other (specify):	Aggregate Year-to-Date > \$	1,450.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E
Dr. Frank S. Farkas		day, year)	Receipt this F
1721 Brightwaters Blvd., N.E.	Wellcare Health Cntr.	. 11/14/97	(1,00
St. Petersburg, FL 33704	Occupation		redesig
<u> </u>	eneral chiropractor		
Other (specify):	Aggregate Year-to-Date > \$	1 450 00	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 27 | 94 FOR LINE NUMBER 11ai

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of i
Dr. Frank S. Farkas		ouj, year	•
1721 Brightwaters Blvd., N.E.	Wellcare Health Cntr.	11/14/97	1,0
St. Petersburg, FL 33704	Occupation		redesig
Receipt For: Primary X General	chiropractor Aggregate Year-to-Date > \$		
Other (specify):		1,450 00 Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Dr. Frank S. Farkas	Welless Hoolth Cate	11/14/97	(5
1721 Brightwaters Blvd., N.E.	Wellcare Health Cntr.		reattr
St. Petersburg, FL 33704	Occupation Chiropractor		10mm
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1.450.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Toni Farkas		day, year)	Receipt this
1721 Brightwaters Blvd., N.E.	Wellcare Health Cntr.	11/14/97	5
St. Petersburg, FL 33704	Occupation		reattr
Receipt For: X Primary General	bookkeeper		
Other (specify):	Aggregate Year-to-Date > \$	550.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Peggy Hines Farmer		10/04/07	
Five N. Ravenfield Lane	n/a	12/01/97	5
Ormond Beach, FL 32174	Occupation		
Receipt For: X Primary General	NONE Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Aubrey J. Ferrao 4001 Tamiami Trail, N., #350	Gulf Bay Group	10/29/97	2,0
Naples, FL 34103	Occupation		
Receipt For: X Primary General	president		
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	
F. Full Name, Mailing Address and ZIP Code Aubrey J. Ferrao	Name of Employer	Date (month, day, year)	Amount o Receipt this
4001 Tamiami Trail, N., #350	Gulf Bay Group	12/10/97	(1,0 redesi
Naples, FL 34103	Occupation president		icio
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date S	2.000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Aubrey J. Ferrao		day, year)	Receipt thi
4001 Tamiami Trail, N., #350	Gulf Bay Group	12/10/97	1,
Naples, FL 34103	Occupation		redes
Receipt For: Primary X General	president Aggregate Year-to-Date > \$	2.000.00	
Other (specify):	Aggregate Four to Date	- 411111	

ITEMIZED RECEIPTS

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

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Friends of Connie Mack		Date (month,	Amount of Each
A. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
Eugene C. Figg, Jr. 410 North Ride	Figg Engineering	10/27/97	500.0
Tallahassee, FL 32303	Occupation		
Receipt For: X Primary General	engineer		
Other (specify):	Aggregate Year-to-Date > \$	500.00	of Fook
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene C. Figg, Jr. 410 North Ride	Figg Engineering	11/15/97	(500. reattribut
Tallahassee, FL 32303	Occupation		reamiou
Receipt For: X Primary General	engineer		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Ann Ruth Figg 410 North Ride	Magnolia Management	11/15/97	500. reattribu
Tallahassee, FL 32303	Occupation		ICam Iou
Receipt For: X Primary General	consultant		
Other (specify):	Aggregate Year-to-Date S	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Jerome S. Fletcher P. O. Box 1219	Fletcher Land Corp.	10/27/97	1,000
Ponte Vedra Beach, FL 32082	Occupation		
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Jerome S. Fletcher P. O. Box 1219	Fletcher Land Corp.	11/28/97	(1,000 redesign
Ponte Vedra Beach, FL 32082	Occupation		Idicigii
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Jerome S. Fletcher P. O. Box 1219	Fletcher Land Corp.	11/28/97	1,00 redesign
Ponte Vedra Beach, FL 32082	Occupation		l Idioigi
Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date > S	1.000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Maria G. Ford 2970 St. Johns Avenue, 3-G	n/a	7/16/97	60
Jacksonville, FL 32205	Occupation		
Congr	·		1
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	600.00	
Outer (character)			1
UBTOTAL of Receipts This Page (optional)			>

ITEMIZED RECEIPTS

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

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Friends of Connie Mack A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maria G. Ford		044/07	/500 O
2970 St. Johns Avenue, 3-G	n/a	8/11/97	(500.00 redesignated
Jacksonville, FL 32205	Occupation		Idicilian
Receipt For: X Primary Ge	neral <u>none</u> Aggregate Year-to-Date	\$ 600.00	
Other (specify):		Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
Maria G. Ford	,	8/11/97	500.0
2970 St. Johns Avenue, 3-G	n/a	8/11/9/	redesignate
Jacksonville, FL 32205	Occupation		TOLONGIAMO
Receipt For: Primary X G	eneral NODE Aggregate Year-to-Date	\$ 600.00	
Other (specify):		Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
H. Leroy Francis	- · · · · ·	P.A. 10/30/97	1,000.0
P. O. Box 161225	Cardio Surgeons, P	2.A. 10/30/97	1,000.0
Altamonte Springs, FL 32716	Occupation		
Receipt For: X Primary G	eneral administrator Aggregate Year-to-Date	\$ 1,000,00	
Other (specify):		Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Charles A. Franzblau		10/20/07	1,000.0
5014 Shore Crest Circle	Thompson & Co.	10/29/97	1,000.0
Tampa, FL 33609	Occupation		
	General dir. of marketing Aggregate Year-to-Date	s 1.000.00	
Other (specify):	Aggregate real to 2	Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Jo Franzblau	T Co of	Tampa 10/29/97	1,000.0
1102 N. Culbreath Isles Drive	Thompson Co. of	Tampa 10/29/97	1,000
Tampa, FL 33629	Occupation		
Receipt For: X Primary	General buyer Aggregate Year-to-Date	> \$ 1,000.00	1
Other (specify):		Date (month,	Amount of Eacl
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Louis Frey	y4 -1	11/12/97	300.
139 Genius Drive	Lownes et al		
Winter Park, FL 32789	Occupation		
Receipt For: X Primary	General attorney Aggregate Year-to-Date	> s 300.00	
Other (specify):		Date (month,	Amount of Eac
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peri
Theodore S. Fries	F	Inc. 9/25/97	500
5465 N.E. First Lane	Emergency One,	1110. 31W131	
Ocala, FL 34471	Occupation		
Receipt For: X Primary	General president Aggregate Year-to-Date	>\$ 500.00	
Other (specify):	Aggregate real-to bate		
SUBTOTAL of Receipts This Page (optional)			>

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 30 OF 94 FOR LINE NUMBER

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
John W. Frost, II P. O. Box 2188	Frost & O'Toole	10/24/97	250
Bartow, FL 33830	Occupation		
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Paul G. Gabos		day, year)	ricocipi tino t
5667 Wellington Drive	Lincare Holdings	11/04/97	1,000
Palm Harbor, FL 34685	Occupation		
Receipt For: X Primary General	chief fin. officer		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Rosemary Galbraith		day, year)	·
One Beach Drive, S.E., #1802	n/a	10/17/97	500
St. Petersburg, FL 33701	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Robert H. Gaynor		Gay, year,	•
14421 Old Hickory Blvd.	self-employed	7/16/97	500
Ft. Myers, FL 33912	Occupation		
Receipt For: X Primary General	consultant		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Robert W. Genzman		day, year)	·
1851 Wind Harbor Road	Akerman, Senterfitt	11/05/97	1,00
Orlando, FL 32809	Occupation		
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
Robert W. Genzman		day, year)	•
1851 Wind Harbor Road	Akerman, Senterfitt	12/26/97	(30
Orlando, FL 32809	Occupation		redesign
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E
Robert W. Genzman		day, year)	•
1851 Wind Harbor Road	Akerman, Senterfitt	12/26/97	30
Orlando, FL 32809	Occupation		redesign
Receipt For: Primary X General	attorney		
	Aggregate Year-to-Date > \$	1.000.00	

ITEMIZED RECEIPTS

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

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FOR LINE NOMBER

11ai

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) Friends of Connie Mack Date (month, Amount of Each A. Full Name, Mailing Address and ZiP Code Name of Employer day, year) Receipt this Period John F. Geraci 100.00 7/14/97 Tampa College 3101 Buttercup Street Seffner, FL 33584 Occupation teacher General Receipt For: X Primary Aggregate Year-to-Date 300.00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) R. Corbin Glos 400.00 self-employed 7/21/97 3310 Lykes Avenue Tampa, FL 33611 Occupation attorney Primary X General Receipt For: Aggregate Year-to-Date 400 00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Theodore E. Gordon 300.00 8/29/97 n/a 969 Beachland Blvd. Vero Beach, FL 32963 Occupation retired Receipt For: X Primary General Aggregate Year-to-Date 300.00 Other (specify): Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Thomas Gosnell 500.00 10/24/97 n/a 774 Lake Road Webster, NY 14580 Occupation retired X Primary General Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Jerry Grace 250.00 12/12/97 information requested P. O. Box 863 Clewiston, FL 33440 Occupation information requested X Primary General Receipt For: Aggregate Year-to-Date > S 250.00 Other (specify): Amount of Each Name of Employer Date (month, F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Thomas R. Grady 1,000.00 Grady & Assoc. 11/04/97 P. O. Box 10909 Naples, FL 34101 Occupation attorney General X Primary Receipt For: Aggregate Year-to-Date 0.00 Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Thomas R. Grady (1,000.00)11/15/97 Grady & Assoc. P. O. Box 10909 reattributed Naples, FL 34101 Occupation X Primary General attorney Receipt For: Aggregate Year-to-Date 0.00Other (specify): SUBTOTAL of Receipts This Page (optional) ... TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 32 OF 94
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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Ann G. Grady			
P. O. Box 10909	self-employed	11/15/97	1,0
Naples, FL 34101	Occupation		reattri
Receipt For: X Primary General	personal trainer Aggregate Year-to-Date > \$	1.000.00	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Charles L. Grannon		day, year)	Receipt this
248 Key Palm Road	n/a	7/16/97	1,0
Boca Raton, FL 33432	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date \$	650.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Amy Austin Guagliardo			•
811 Woodlyn	Hillsborough County	10/27/97	1,0
Tampa, FL 33629	Occupation		
Receipt For: X Primary General	teacher Angregate Year-to-Date > \$	1 000 00	
Other (specify):	, iggiogais real to	1.000,00 Date (month,	Amount o
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
H.L.O.T. Partnership	n to	10/24/97	:
4229 Highway 90	n/a	10/24/97	•
Pace, FL 32571	Occupation partnership		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Edwin A. Henry		day, year)	Receipt this
5020 San Pedro Court	Henry Company Homes	10/24/97	(′.
Milton, FL 32583	Occupation		
Receipt For: X Primary General	general contractor		
Other (specify):	Aggregate Year-to-Date > \$	750.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt thi
Susan A. Henry	TT G TT		,
5020 San Pedro Court	Henry Company Homes	10/24/97	(
Milton, FL 32583	Occupation		
Receipt For: X Primary General	bookkeeper Aggregate Year-to-Date > \$	750.00	
Other (specify):	7 95 - 5	Date (month,	Amount o
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt thi
J. P. Hall, Jr.	1st Union Bank	10/20/97	1,
P. O. Box 395			-,
Green Cove Springs, FL 32043 Receipt For: X Primary General	chm. of adv. council		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1 000 00	
	•		

ITEMIZED RECEIPTS

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

FOR LINE NUMBER

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.

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M. Hamilton, M.D.				
424 Beach Dr. N.E.		John Hamilton, MD PA	7/14/97	500.00
St. Petersburg, FL 33701		Occupation		
, ·	X General	physician Aggregate Year-to-Date > \$	1.000.00	
Other (specify):		Name of Employer	Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code John M. Hamilton, M.D.			day, year)	Receipt this Period
424 Beach Dr. N.E.		John Hamilton, MD PA	10/24/97	500.00
St. Petersburg, FL 33701		Occupation	-	
Receipt For: X Primary	General	physician		
Other (specify):	! 	Aggregate Year-to-Date > \$	1,000.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M. Hamilton, M.D.				/E00.00
424 Beach Dr. N.E.		John Hamilton, MD PA	10/24/97	(500.00 reattributed
St. Petersburg, FL 33701		Occupation		Team Iouice
Receipt For: X Primary	General	physician Aggregate Year-to-Date > \$	1,000.00	
Other (specify):		Name of Employer	Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code		namo di Empioya	day, year)	Receipt this Period
Imy N. Hamilton 424 Beach Drive, N.E.		n/a	10/24/97	500.00
St. Petersburg, FL 33701		Occupation		reattributed
Receipt For: X Primary	General	retired		
Other (specify):		Aggregate Year-to-Date > S	500.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom L. Hansberger				•
1024 S.E. Fourth Street		Hansberger Global Inv	10/20/97	1,000.00
Ft. Lauderdale, FL 33301		Occupation		
Receipt For: X Primary	General	investment counselor Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	·		Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code		Name of Employer	day, year)	Receipt this Period
Tom L. Hansberger 1024 S.E. Fourth Street		Hansberger Global Inv	11/21/97	(1,000.0
Ft. Lauderdale, FL 33301		Occupation Occupation		reattribute
Receipt For: X Primary	General	investment counselor		
Other (specify):		Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Malling Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beverley G. Hansberger				•
1024 S.E. Fourth Street		n/a	11/21/97	1,000.0
Ft. Lauderdale, FL 33301		Occupation		reattribute
Receipt For: X Primary	General	NONE Aggregate Year-to-Date > \$	1.000.00	
Other (specify):		Addredate real-to-bate / 5	1 (# #) (#)	

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Joseph E. Harris			•
1094 McKean Circle	Ivey, Harris & Walls	11/24/97	500
Winter Park, FL 32789	Occupation		
Receipt For: X Primary General	engineer Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
Doris C. Harvey	self-employed	10/30/97	50
1114 Culbreath Isles Drive		10/30/5/	
Tampa, FL 33629	Occupation agriculture		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E
Germaine B. Haserot		day, year)	Receipt this P
1620 Mayflower Court, Apt. B615	n/a	7/21/97	45
Winter Park, FL 32792	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	700.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Germaine B. Haserot			_
1620 Mayflower Court, Apt. B615	n/a	10/24/97	5
Winter Park, FL 32792	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	700.00	Amount of E
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this F
Germaine B. Haserot		11/14/97	(5
1620 Mayflower Court, Apt. B615	n/a	11/14/97	redesig
Winter Park, FL 32792	Occupation		Icacong
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	700.00	
Other (specify):		Date (month,	Amount of I
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Germaine B. Haserot	n/a	11/14/97	;
1620 Mayflower Court, Apt. B615			redesig
Winter Park, FL 32792 Receipt For: Primary X General	Occupation retired		•
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	700.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Betty Jane Hater		day, year)	Receipt this
4814 Culbreath Isles Road	n/a	10/27/97	
Tampa, FL 33629	Occupation		
Receipt For: X Primary General	none		
Other (specify):	Aggregate Year-to-Date > \$	650.00	

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this I
Betty Jane Hater			
4814 Culbreath Isles Road	n/a	10/30/97	5
Tampa, FL 33629	Occupation		
necespt to it.	neral NONE Aggregate Year-to-Date > \$	650.00	
Other (specify):	Name of Employer	650.00 Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Betty Jane Hater	-/-	11/16/97	(3
4814 Culbreath Isles Road	n/a	11/10/9/	redesig
Tampa, FL 33629	Occupation neral none		icacon
neceipt rot.	eneral NONE Aggregate Year-to-Date \$	650.00	
Other (specify): C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Betty Jane Hater		day, year)	Receipt this
4814 Culbreath Isles Road	n/a	11/16/97	3
Tampa, FL 33629	Occupation	 	redesig
Receipt For: Primary X Ge			
Other (specify):	Aggregate Year-to-Date > \$	650.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Frances Pew Hayes			·
13189 Valewood Drive	n/a	7/16/97	-
Naples, FL 34119	Occupation		
Receipt For: Primary X G	eneral retired	- F00 00	
Other (specify):	Aggregate Year-to-Date S	500.00	Amount o
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Allen S. Henry	Harris Corr	7/25/97	,
218 Fourth Avenue	Harris Corp.	116171	•
Melbourne Beach, FL 32951	Occupation div. president		
Heceipt For.	Aggregate Year-to-Date > \$	250.00	
Other (specify):	Name of Employer	Date (month,	Amount o
F. Full Name, Mailing Address and ZIP Code William D. Herbert		day, year)	Receipt this
4523 Brookwood Drive	n/a	9/25/97	
Tampa, FL 33629	Occupation		
	General retired		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Oscar R. Hernandez		day, year)	
212 Sudbury Drive	Flo-Sun, Inc.	11/17/97	1,
Atlantis, FL 33462	Occupation		
Receipt For: X Primary 0	Seneral vice-president		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 36 | 94

Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
George F. Hickey		ouj, year,	Deceibt mis Li
P. O. Box 10765	Bond Auto Sales	10/24/97	1,00
Tampa, FL 33679	Occupation	-1	
Receipt For: X Primary General	manager		
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
George F. Hickey		20,, , 500,	ř
P. O. Box 10765	Bond Auto Sales	10/24/97	1,00
Tampa, FL 33679	Occupation	-	
Receipt For: X Primary General	manager		
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	
C. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
George F. Hickey			
P. O. Box 10765	Bond Auto Sales	11/15/97	(1,00
Tampa, FL 33679	Occupation	_	redesig
Receipt For: X Primary General	manager		
Other (specify):	Aggregate Year-to-Date > \$	2.000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this I
George F. Hickey			
P. O. Box 10765	Bond Auto Sales	11/15/97	1,00
Tampa, FL 33679	Occupation	_	redesig
Receipt For: Primary X General	manager		
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	<u> </u>
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this
Elija M. Hicks, Jr.			1/
4777 Ringwood Meadow	n/a	9/03/97	10
Sarasota, FL 34235	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date S	300.00	A
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Benjamin H. Hill, III			_
1909 Brookline Street	Hill Ward & Henderson	11/04/97	5
Tampa, FL 33629	Occupation		
Receipt For: X Primary General	attorney	500.00	
Other (specify):	Aggregate Year-to-Date > \$	500.00	A
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Lewis H. Hill, III			<u></u>
P. O. Box 3391	Foley & Lardner	7/28/97	5
Tampa, FL 33601	Occupation		
Receipt For: X Primary General	Addregate Year-to-Date > \$		l
Other (specify):	Aggregate Year-to-Date > \$	750.00	

ITEMIZED RECEIPTS

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

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ME OF COMMITTEE (In Full)			
Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Marlin Hilliard			4 000 0
Route 2, Box 175	Hilliard Bros Groves	11/24/97	1,000.0
Clewiston, FL 33440	Occupation		
Receipt For: X Primary General	president Aggregate Year-to-Date > \$	1 000 00	
Other (specify):		1 000 00 Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
L. Charles Hilton, Jr.		11/04/07	1 000 0
P. O. Box 2462	self-employed	11/04/97	1,000.0
Panama City, FL 32401	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	2,000.00	
Other (specify):		Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peno
L. Charles Hilton, Jr.	-161	11/04/07	1,000.0
P. O. Box 2462	self-employed	11/04/97	1,000.0
Panama City, FL 32401	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date > \$	2.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Marie of Employes	day, year)	Receipt this Perio
E. W. Hinson, Jr.	16 14	9/14/07	100.0
Box 1169	self-employed	8/14/97	100.0
Quincy, FL 32351	Occupation		
Receipt For: X Primary General	oil distributor Aggregate Year-to-Date > \$	300.00	
Other (specify):	- Inggregate that is a second	Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
Robert G. Hodson		7/24/97	500.0
808 Seasage Drive	n/a	1124131	500.
Delray Beach, FL 33483	Occupation		
Receipt For: Primary X General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify):		Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Theodore J. Hoepner	Sun Donle	10/09/97	2,000.
2047 Forest Club Drive	Sun Bank	10/05/57	2,000.
Orlando, FL 32804	Occupation		
Receipt For: X Primary General	chairman Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	1,93,03	Date (month,	Amount of Eacl
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peri
Theodore J. Hoepner	Sam Damle	11/08/97	(1,000.
2047 Forest Club Drive	Sun Bank		reattribu
Orlando, FL 32804	Occupation		Ramiou
Receipt For: X Primary General	chairman Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	riggingula Tear to Sale		
JBTOTAL of Receipts This Page (optional)			
OTAL This Period (last page this line number only)		>	

ITEMIZED RECEIPTS

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

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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) Friends of Connie Mack Amount of Each Date (month, A. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Barbara J. Hoepner 1.000.00 11/08/97 2047 Forest Club Drive n/a reattributed Orlando, FL 32804 Occupation housewife General Receipt For: Aggregate Year-to-Date 000.00Other (specify): Date (month. Amount of Each Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) William D. Hoffman 100.00 7/16/97 Hoffman & Hoffman P. O. Box 824 Coconut Grove, FL 33233 Occupation attorney General X Primary Receipt For: 500.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) α William D. Hoffman (25.00)Hoffman & Hoffman 8/23/97 P. O. Box 824 redesignated Coconut Grove, FL 33233 Occupation attorney X Primary Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) William D. Hoffman 25.00 Hoffman & Hoffman 8/23/97 P. O. Box 824 redesignated Coconut Grove, FL 33233 Occupation C attornev X General Primary Receipt For: 500.00 Aggregate Year-to-Date Other (specify): €, Amount of Each Name of Employer Date (month, E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) C2 David G. Holder 250.00 U. S. Sugar Corp. 12/12/97 1035 Palmetto Street α Clewiston, FL 33440 Occupation σ geneticist X Primary Receipt For: 250.00 Aggregate Year-to-Date > \$ Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John H. Holloway 500.00 information requested 11/04/97 16229 E Lullwater Drive Panama City Beach, FL 32413 Occupation information requested General Receipt For: 500.00 Aggregate Year-to-Date > \$ Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Caswell F. Holloway, Jr. 100.00 8/22/97 H.H.C. Corp. 18465 S.E. Village Circle Jupiter, FL 33469 Occupation executive X Primary General Receipt For: Aggregate Year-to-Date Other (specify): SUBTOTAL of Receipts This Page (optional)

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

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		Date (month	Amount of Eac
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
Richard Hopkins		0/00/07	250
1650 Pine Tree Lane, Apt. 104	Fla. Studio Theatre	8/08/97	250.
Sarasota, FL 34236	Occupation		
Receipt For: X Primary Gene	Canal Caracter		
Other (specify):	53-23	250.00	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
W. H. Hopkins			100
P. O. Box 958	Hopkins Pontiac	7/22/97	100
Marianna, FL 32447	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	300.00	Amount of Eco
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
William T. Hornaday			100
26770 Stardust Drive, S.E.	n/a	9/29/97	100
Bonita Springs, FL 34135	Occupation		
Receipt For: X Primary Gene		055.55	
Other (specify):	Aggregate Year-to-Date > \$	350.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
William T. Hornaday			100
26770 Stardust Drive, S.E	n/a	10/20/97	100
Bonita Springs, FL 34135	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	350.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Hazel C. Hough			
One Beach Drive, S.E., #1002	Wm. R. Hough & Co.	12/09/97	750
St. Petersburg, FL 33701	Occupation		
Receipt For: Primary X Gen			
Other (specify):	Aggregate Year-to-Date > \$	750.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ear Receipt this Pe
William R. Hough			•
1 Beach Drive, S.E., Apt. 1002	Wm. R. Hough & Co.	12/01/97	750
St. Petersburg, FL 33701	Occupation		
Receipt For: Primary X Gen			
Other (specify):	Aggregate Year-to-Date > \$	750.00	
G. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Mary Frances Howard			·
1240 Shadow Lane	n/a	7/02/97	100
Ft. Myers, FL 33901	Occupation		
1	neral housewife		
Other (specify):	Aggregate Year-to-Date > \$	250.00	

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Frances Howard		ou, year	•
1240 Shadow Lane	n/a	10/20/97	50.00
Ft. Myers, FL 33901	Occupation		
Receipt For: X Primary General	housewife		
Other (specify):	Aggregate Year-to-Date > \$	250.00	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Period
Bruce Hudson, M.D.	- W - 100 D	0/04/07	100.00
8107 DeSoto Memorial Highway	Bruce Hudson, MD, PA	9/04/97	100.00
Bradenton, FL 34209	Occupation		
Receipt For: Primary X General	physician Aggregate Year-to-Date > \$	600.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Tame of Employer	day, year)	Receipt this Period
Page Hufty	self-employed	7/09/97	1,000.00
330 Island Road Palm Beach, FL 33480			,
	Occupation investments		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each
H. Wayne Huizenga, Jr.		day, year)	Receipt this Period
1527 S.E. 11th Street	Republic Industries	11/06/97	1,000.00
Ft. Lauderdale, FL 33310	Occupation		
Receipt For: X Primary General	vice-president		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Fuli Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Bob Humphries			200.0
P. O. Box 1822	Fowler, White	7/18/97	300.0
Tampa, FL 33601	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	622.24	
Other (specify):		633.34 Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
J. Bob Humphries	Forular White	8/13/97	(300.0
P. O. Box 1822	Fowler, White		redesignate
Tampa, FL 33601	Occupation attorney		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date S	633.34	
	Name of Employer	Date (month,	Amount of Each
G. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Perio
J. Bob Humphries P. O. Box 1822	Fowler, White	8/13/97	300.0
Tampa, FL 33601	Occupation Occupation		redesignat
Receipt For: Primary X General	attorney		_
Other (specify):	Aggregate Year-to-Date > \$	633.34	
			i '

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 41 OF 94 FOR LINE NUMBER

Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Period
Dorothy H. Hunt		day, year)	neceipt this relied
8209 Bardmoor Place, #101	n/a	10/03/97	200.00
Seminole, FL 33777	Occupation	-	
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each
William A. Hunt		day, year)	Receipt this Period
P. O. Box 6068	Gulf-Atlantic Corp.	11/05/97	1,500.00
Pensacola, FL 32503	-		ŕ
[V]	Occupation CONTRACTOR		
Receipt For: Other (specify): General	Aggregate Year-to-Date > \$	1,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each
Constance D. Hunter		day, year)	Receipt this Penod
4329 S. Atlantic Avenue	n/a	7/28/97	500.00
Ponce Inlet, FL 32127			
	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date S	600.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Talle of Elipoje.	day, year)	Receipt this Period
Constance D. Hunter	-/-	10/24/97	100.00
4329 S. Atlantic Avenue	n/a	10/24/97	100.00
Ponce Inlet, FL 32127	Occupation		
Receipt For: X Primary General	NONE Aggregate Year-to-Date > \$	600.00	
Other (specify):			Amount of Each
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Period
W. F. Hurlburt, Jr.	,	7/21/07	300.00
P. O. Box 2070	n/a	7/31/97	300.00
Islamorada, FL 33036	Occupation		
Receipt For: Primary X General	retired	700.00	
Other (specify):	Aggregate Year-to-Date > \$	700.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janice C. Hutchinson			200.00
12825 Coco Plum Lane	n/a	7/28/97	300.00
Naples, FL 34119	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
H. J. Hvide			,,,,,,,
2200 Eller Drive	Eller & Company	11/12/97	1,000.00
Ft. Lauderdale, FL 33316	Occupation		
Receipt For: X Primary General	chairman		
Other (specify):	Aggregate Year-to-Date > \$	1.500.00	····
UBTOTAL of Receipts This Page (optional)			
OTAL This Period (last page this line number only)			
OTAL This Period (last page this line number only)			

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Carolyn P. Ireland			•
P. O. Box 70	n/a	11/05/97	1,00
Lynn Haven, FL 32444	Occupation		
Receipt For: X Primary General	housewife Aggregate Year-to-Date > \$	1 000 00	
Other (specify):		1,000.00 Date (month,	Amount of I
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this i
Edward G. Izzo, Jr., M.D.	D. W. Dessay	11/04/07	1,00
11332 Bloomington Drive	Pupello, Bessone	11/04/97	1,00
Tampa, FL 33635	Occupation physician		
Receipt For: X Primary Gener	Aggregate Year-to-Date > \$	1,000.00	
Other (specify): C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Michael L. Jamieson		day, year)	Receipt this I
2530 Sunset Drive	Holland & Knight	10/28/97	1,00
Tampa, FL 33629	Occupation		•
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Michael L. Jamieson		uay, year,	•
2530 Sunset Drive	Holland & Knight	11/18/97	(5
Tampa, FL 33629	Occupation		redesig
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Michael L. Jamieson	TT 11 1 0 TT 1 1.	11/10/07	5
2530 Sunset Drive	Holland & Knight	11/18/97	redesig
Tampa, FL 33629	Occupation		itutois
Receipt For: Primary X Gene	ral attorney Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
F. Full Name, Mailing Address and ZIP Code Michael L. Jamieson	, , , , , , , , , , , , , , , , , , ,	day, year)	Receipt this
2530 Sunset Drive	Holland & Knight	11/18/97	(5
Tampa, FL 33629	Occupation		reattr
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Mailing Address and ZIP Code Elizabeth P. Jamieson	Name of Employer	Date (month, day, year)	Amount of Receipt this
2530 Sunset Drive	Colliers-Arnold Mgmt.	11/18/97	reatti
Tampa, FL 33629	Occupation		ıcallı
Receipt For: X Primary Gene	real estate asset mgr Aggregate Year-to-Date > \$	500.00	
Other (specify):	Aggregate real-to-bate / 5	XXIIIX	

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Paul Janssens 840 S. Collier Blvd., Apt. 170	Soft-Art, Inc.	12/03/97	1,000
Marco Island, FL 34145	Occupation president		
Receipt For:	Aggregate Year-to-Date > \$	1.000.00	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
Howard M. Jenkins		day, year)	neceipt this re
531 Lone Palm Drive	Publix Supermarkets	8/25/97	500
Lakeland, FL 33815	Occupation		
Receipt For: Primary X General	executive		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Howard M. Jenkins	_		50
531 Lone Palm Drive	Publix Supermarkets	11/24/97	30
Lakeland, FL 33815	Occupation		
Receipt For: X Primary General	executive Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
Douglas R. Johnson	information requested	11/04/97	25
602 Kristanna Drive	Occupation		
Panama City, FL 32405 Receipt For: X Primary General	information requested		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	250.00	
E. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
David A. Jones			•
P. O. Box 1438	Humana, Inc.	10/20/97	1,00
Louisville, KY 40201	Occupation		
Receipt For: X Primary General	chairman	1 000 00	
Other (specify):	Aggregate Year-to-Date > \$	1,000.00 Date (month,	Amount of E
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this F
David C. Jones	self-employed	10/14/97	4(
3435 10th Street, North			
Highpoint, FL 33940	Occupation realtor		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of I Receipt this
David C. Jones		day, year)	-
3435 10th Street, North	self-employed	11/25/97	(2:
Highpoint, FL 33940	Occupation		redesig
Receipt For: X Primary General	realtor		
	Aggregate Year-to-Date > \$	500.00	l

ITEMIZED RECEIPTS

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

PAGE₄₄ OF₉₄ FOR LINE NUMBER 11ai

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poses, other than using the name and address of any political comm AME OF COMMITTEE (in Full)			
Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David C. Jones 3435 10th Street, North	self-employed	11/25/97	250.00
Highpoint, FL 33940 Receipt For: Primary X General	Occupation realtor		redesignated
Other (specify):	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David C. Jones 3435 10th Street, North	self-employed	11/25/97	(150.00 reattributed
Highpoint, FL 33940 Receipt For: X Primary General	Occupation realtor	700.00	ream louice
Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. David C. Jones 3435 10th Street, North	n/a	11/25/97	150.00 reattributed
Highpoint, FL 33940 Receipt For: X Primary General	Occupation housewife Aggregate Year-to-Date > \$	150.00	Total
Other (specify):		Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Hugh E. Jones 5764 Red Cedar Street	Urinette, Inc.	7/16/97	(1,000.0 reattribute
Pensacola, FL 32507 Receipt For: X Primary General	Occupation president		i realitious
Other (specify):	Aggregate Year-to-Date > \$	0.00	
E. Full Name, Mailing Address and ZIP Code Kathie K. Jones	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
5764 Red Cedar Street	n/a	7/16/97	1,000.0 reattribut
Pensacola, FL 32507 Receipt For: X Primary General	Occupation homemaker		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code David C. Jones, Jr.	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
5234 Sea Shell Avenue	self-employed	7/21/97	300.
Naples, FL 33940 Receipt For: X Primary General	Occupation realtor		
Receipt For: Other (specify): General General	Aggregate Year-to-Date > \$	550.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eacl Receipt this Peri
Ian Kaplan 1717 N. Bayshore Drive, Suite 2000	Trans-Chemical Corp.	10/27/97	500.
Miami, FL 33132	Occupation exec. vice-president		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date \$	1.000.00	
			>
SUBTOTAL of Receipts This Page (optional)			
TOTAL This Period (last page this line number only)			\forall
IDIAL INS Penod (last page this line number only)			I

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 45 OF 94 FOR LINE NUMBER

11ai 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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Herbert D. Katz 1.000.00 10/24/97 self-employed 4030-C Sheridan Street Hollywood, FL 33021 Occupation General investor X Primary Receipt For: Aggregate Year-to-Date .000.000 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code day, year) Receipt this Period Herbert D. Katz (1,000.00)11/14/97 self-employed 4030-C Sheridan Street redesignated Hollywood, FL 33021 Occupation investor General X Primary Receipt For: Aggregate Year-to-Date 1.000.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Herbert D. Katz 1,000.00 11/14/97 self-employed 4030-C Sheridan Street redesignated Hollywood, FL 33021 Occupation X General investor Primary Receipt For: Aggregate Year-to-Date 000.00Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Sherman M. Kaufman 250.00 10/20/97 Tru-Kay Mfg. Co. 3845 Live Oak Blvd. Delray Beach, FL 33445 Occupation jewelry mfg. X Primary General Receipt For: Aggregate Year-to-Date 250.00 Other (specify): Amount of Each Name of Employer Date (month, E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bing Kearney 1,000.00 11/04/97 Kearney Development 9625 Alonzo Road Riverview, FL 33569 Occupation developer General X Primary Receipt For: 1.000.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month. Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Carol Anne Kelly 1.000.00 10/14/97 Premier 4000 Tunlaw Road, N.W. Washington, D.C. 20007 Occupation govt. relations General X Primary 1.000.00 Aggregate Year-to-Date Other (specify): Amount of Each Name of Employer Date (month. G. Full Name. Mailing Address and ZIP Code Receipt this Period day, year) Mrs. Green Keltner 300.00 10/02/97 n/a 15048 Tamarind Cay Court, #606 Ft. Myers, FL 33908 Occupation housewife General Receipt For: Aggregate Year-to-Date Other (specify): SUBTOTAL of Receipts This Page (optional)

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

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Use separate schedule(s) for each category of the Detailed Summary Page PAGE 46 OF 94
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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each
Ralph E. Kent		day, year)	Receipt this Period
79 Forest At Duke Drive	n/a	9/18/97	100.0
Durham, NC 27705	Occupation	-	
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas A. Kershaw		uay, year,	•
84 Beacon Street	Hampshire House	7/22/97	500.0
Boston, MA 02108	Occupation		
Receipt For: X Primary General	business owner		
Other (specify):	Aggregate Year-to-Date S	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Perio
Richard S. Kessler		day, year)	
4008 Ancient Oak Court	Kessler & Assoc.	10/31/97	500.0
Annandale, VA 22003	Occupation	- 	
Receipt For: X Primary General	consultant		
Cother (specify):	Aggregate Year-to-Date > \$	500.00	
D. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Period
Lucile S. Keyes		day, year)	·
2605 31st Street, N.W.	n/a	8/29/97	500.0
Washington, D.C. 20008	Occupation	- -	
IV Consul	housewife		
Receipt For: Primary A General Other (specify):	Aggregate Year-to-Date > \$	1,200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Peri
Arthur H. Keyes, Jr.		day, year)	•
2605 31st Street, N.W.	n/a	10/30/97	1,000.
Washington, D.C. 20008	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Peri
Jay Kislak		day, year)	
P. O. Box 025409	Kislak Mortgage Corp.	7/14/97	1,000
Miami, FL 33102	Occupation		
Receipt For: Primary X General	mortgage banker		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac Receipt this Per
Alan J. Kluger		day, year)	
1000 W. Island Blvd., #2909	Kluger, Peretz, et al	8/25/97	500
Williams Island, FL 33160	Occupation		
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	0.00	

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
C. B. Knappen		Gay, year,	
2103 South Ocean Blvd.	n/a	7/18/97	250
Delray Beach, FL 33483	Occupation	7	
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$		
Other (specify):	1.93.53	250.00	Amount of E
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this P
Anthony J. Knaus	Tr. G. 1 T	9/06/07	1,000
14410 Carlson Circle	Knaus Systems, Inc.	8/06/97	1,00
Tampa, FL 33626	Occupation		
Receipt For: X Primary General	president Aggregate Year-to-Date > S	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
C. Full Name, Mailing Address and ZIP Code	Trains or Employer	day, year)	Receipt this P
Sidney D. Kobernick, M.D.	n/a	10/14/97	25
5627 Country Lakes Drive			
Sarasota, FL 34243 Receipt For: X Primary General	Occupation		
Receipt For: X Primary General General	Aggregate Year-to-Date > \$	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E
Sidney D. Kobernick, M.D.		day, year)	Receipt this F
5627 Country Lakes Drive	n/a	10/22/97	25
Sarasota, FL 34243	Occupation	- 	
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
James Kovach			
2912 S.W. 68th Lane	n/a	11/10/97	50
Gainesville, FL 32608	Occupation		
Receipt For: Primary X General	retired	100000	
Other (specify):	Aggregate Year-to-Date S	1,000.00	Amount of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this I
Ruth Kovach	7/0	11/10/97	50
2912 S.W 68th Lane	n/a		J.
Gainesville, FL 32608	Occupation		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
	Name of Employer	Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code	Trains of Empisyon	day, year)	Receipt this
Robert R. Krumm P. O. Box 832	n/a	7/17/97	2
Lake Wales, FL 33859	Occupation		
Receipt For: X Primary General	retired		
Receipt For.	Aggregate Year-to-Date > \$	450.00	· · · · · · · · · · · · · · · · · · ·
Other (specify):			

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
Paul M. Kuck			
3034 Hoffner Avenue	Regal Boats	10/27/97	500.0
Orlando, FL 32812	Occupation		
Receipt For: X Primary General	OWNET Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
Latelle M. LaFollette, III	n/a	10/24/97	50.
4887 Windsor Park			
Sarasota, FL 34235	Occupation		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac Receipt this Peri
John LaTour, Jr.		day, year)	·
124 Emmett Street	Economy Electric	9/22/97	150.
Daytona Beach, FL 32114	Occupation		
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	300.00	A
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Sheila Laboda		100/07	350
5285 Summerlin Road	Royal Palm Travel	12/08/97	330
Ft. Myers, FL 33907	Occupation		
Receipt For: X Primary Genera	travel consultant Aggregate Year-to-Date > \$	350.00	
Other (specify):		Date (month,	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pe
David L. Lageschulte	self-employed	8/01/97	1,500
2644 Shriver Drive		0/01/5/	-,
Ft. Myers, FL 33901	Occupation restauranteur		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	1.500.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
F. Full Name, Mailing Address and ZIP Code David L. Lageschulte		day, year)	Receipt this Pe
2644 Shriver Drive	self-employed	8/22/97	(1,000
Ft. Myers, FL 33901	Occupation		redesign
Receipt For: X Primary General	al restauranteur		
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
David L. Lageschulte			1 00
2644 Shriver Drive	self-employed	8/22/97	1,000 redesign
Ft. Myers, FL 33901	Occupation		i renesign
Receipt For: Primary X Gener	al restauranteur Aggregate Year-to-Date > \$	1.500.00	}
Other (specify):	Aggregate rear-to-Date > 5	LOUNT	

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Scott R. Laidig 200.00 7/28/97 Visicom Labs 3713 Ceylon Drive Gulf Breeze, FL 32561 Occupation General businessman Receipt For: X Primary Aggregate Year-to-Date 450 M Other (specify): Date (month, Amount of Each Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Scott R. Laidig 250.00 12/05/97 Visicom Labs 3713 Ceylon Drive Gulf Breeze, FL 32561 Occupation businessman General Receipt For: X Primary Aggregate Year-to-Date 450.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Hymen Lake 500.00 10/22/97 self-employed 7388 Chancery Lane Orlando, FL 32809 Occupation attorney General X Primary Receipt For: Aggregate Year-to-Date > \$ 500.00 Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Hymen Lake (500.00)11/28/97 self-employed 7388 Chancery Lane redesignated Orlando, FL 32809 Occupation attornev X Primary General Receipt For: Aggregate Year-to-Date > \$ 500.00 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Hymen Lake 500.00 11/28/97 self-employed 7388 Chancery Lane redesignated Orlando, FL 32809 Occupation X General attorney Primary Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) William B. Lambert 500.00 8/04/97 n/a 2207 Gulf Shores Blvd., N., #D-4 Naples, FL 34102 Occupation retired General X Primary Receipt For: 500.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer G. Fuil Name, Mailing Address and ZIP Code Receipt this Period day, year) George R. Langford 500.00 8/15/97 n/a P. O. Box 2235 Occupation Tallahassee, FL 32316 X Primary retired General Receipt For: Aggregate Year-to-Date 500.00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS

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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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) E. Robert Langley, Jr. 500.00 10/27/97 n/a 3733 University Blvd. W., Suite 208 Jacksonville, FL 32217 Occupation General X Primary Receipt For: Aggregate Year-to-Date 500 00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) E. Robert Langley, Jr. (500.00)11/17/97 3733 University Blvd. W., Suite 208 n/a redesignated Jacksonville, FL 32217 Occupation retired General X Primary Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) E. Robert Langley, Jr. 500.00 11/17/97 3733 University Blvd. W., Suite 208 n/a redesignated Jacksonville, FL 32217 Occupation X General retired Primary Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month. Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Allen L. Lastinger, Jr. 300.00 10/16/97 Barnett Bank 1145 Campbell Avenue Occupation Jacksonville, FL 32207 officer General X Primary Receipt For: Aggregate Year-to-Date > S 300.00 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Dexter Lehtinen 1,000.00 10/28/97 Lehtinen, O'Donnell 6005 S.W. 102nd Street Occupation Miami, FL 33156 attorney X Primary General Receipt For: Aggregate Year-to-Date .000.00Other (specify): Amount of Each Date (month. Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Carl W. Lentz, M.D. 1,000.00 8/04/97 self-employed 2411 N. Halifax Occupation Daytona Beach, FL 32118 opthamologist General X Primary Receipt For: .000.000 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Carl W. Lentz, M.D. (1,000.00)9/10/97 self-employed 2411 N. Halifax redesignated Occupation Daytona Beach, FL 32118 X Primary General opthamologist Receipt For: Aggregate Year-to-Date 1,000,00 Other (specify): SUBTOTAL of Receipts This Page (optional)

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

ITEMIZED RECEIPTS

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11ai

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NAME OF COMMITTEE (in Full) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Carl W. Lentz, M.D. 1,000.00 9/10/97 self-employed 2411 N. Halifax redesignated Daytona Beach, FL 32118 Occupation X General opthamologist Primary Aggregate Year-to-Date 1 000 00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Jacob E. Levine, M.D. 500.00 8/12/97 3221 N.E. 57th Court self-employed Ft. Lauderdale, FL 33308 Occupation physician X Primary General Receipt For: Aggregate Year-to-Date 600.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Larry A. Lisenby 250.00 12/12/97 U.S. Sugar Corp. P. O. Box 2283 Clewiston, FL 33440 Occupation General supervisor X Primary Receipt For: Aggregate Year-to-Date 250.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Wesley H. Loomis, III 1,000.00 10/10/97 700 John Ringling Blvd., Apt. 305 n/a Sarasota, FL 34236 Occupation retired General X Primary Receipt For: Aggregate Year-to-Date 0.00 Other (specify): Amount of Each Date (month. Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Wesley H. Loomis, III (1,000.00)10/11/97 n/a 700 John Ringling Blvd., Apt. 305 reattributed Sarasota, FL 34236 Occupation retired X Primary Receipt For: 0.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mary P. Loomis 400.00 10/11/97 700 John Ringling Blvd., Apt. 305 n/a reattributed Sarasota, FL 34236 Occupation housewife General X Primary Receipt For: Aggregate Year-to-Date > \$ 200.00 Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mary P. Loomis 600.00 10/11/97 n/a 700 John Ringling Blvd., Apt. 305 reattributed Sarasota, FL 34236 Occupation X General housewife Receipt For: Primary Aggregate Year-to-Date 1 200 00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Tasker G. Lowndes			
400 N. Flagler Drive, A1705	n/a	8/22/97	•
West Palm Beach, FL 33401	Occupation		
Receipt For: X Primary Ge	neral retired Aggregate Year-to-Date	\$ 225.00	
Other (specify):		S 225.00 Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Tasker G. Lowndes		10/20/97	•
400 N. Flagler Drive, A1705	n/a	10/20/97	
West Palm Beach, FL 33401	Occupation retired		
neceipt rot.		\$ 225.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Donald P. Luning		day, year)	Receipt this
1500 Atlantic Blvd., Unit 403	n/a	8/06/97	1,0
Key West, FL 33040	Occupation		·
	 ; ,		
Receipt For: Primary X Ge		\$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
Geraldine J. MacLeod		day, year)	•
1793 Lake Berry Drive	n/a	9/05/97	5
Winter Park, FL 32789	Occupation		
	eneral homemaker		
Other (specify):	Aggregate Year-to-Date	s 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Florence S. Macdonald		10/17/07	5
1270 S.W. Shoreline Drive	n/a	10/17/97	
Palm City, FL 34990	Occupation	·	
Receipt For.	ieneral retired	s 500.00	
Other (specify):	//gg/cga.co / co	Date (month,	Amount of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
John L. Macdonald	JLM Industries, In	c. 9/11/97	1,5
8675 Hidden River Parkway			,
Tampa, FL 33637	Occupation Seneral executive		
Receipt For: X Primary C		s 2,000.00	
	Name of Employer	Date (month,	Amount o
G. Full Name, Mailing Address and ZIP Code John L. Macdonald		day, year)	Receipt this
8675 Hidden River Parkway	JLM Industries, In	sc. 9/30/97	(1,
Tampa, FL 33637	Occupation		redes
	General executive		
Other (specify):		> \$ 2,000.00	

ITEMIZED RECEIPTS

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

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to the series were not be eald or used by any person for the purpose of soliciting contributions of for contributions
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
Any injointation copied nom such committee
Any information object the same and address of any political committee to solicit contributions from such committee.

A. Full Name, Mailing Address and ZIP Code	<u>,,</u>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John L. Macdonald				•
8675 Hidden River Parkway		JLM Industries, Inc.	9/30/97	1,000.0
Tampa, FL 33637		Occupation	\neg	redesignate
Receipt For: Primary X	General	executive		
Other (specify):		Aggregate Year-to-Date > \$	2,000.00	Amount of Each
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Receipt this Perio
James F. Major 7305 Pelican Island Drive		WFIS-TV	11/10/97	200.0
Tampa, FL 33634		Occupation		
Receipt For: X Primary	General	general manager		
Other (specify):	J	Aggregate Year-to-Date > \$	700.00	
C. Full Name, Mailing Address and ZIP Code James F. Major		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
7305 Pelican Island Drive		WFTS-TV	12/24/97	(200.) redesignat
Tampa, FL 33634		Occupation		2000-8
Receipt For: X Primary	General	general manager Aggregate Year-to-Date > \$	700.00	
Other (specify):		Name of Employer	Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code		Name of Employor	day, year)	Receipt this Peri
James F. Major 7305 Pelican Island Drive		WFTS-TV	12/24/97	200. redesignat
Tampa, FL 33634		Occupation		TCCCOTETION
Receipt For: Primary X	General	general manager Aggregate Year-to-Date > \$	700.00	
Other (specify):			700.00 Date (month,	Amount of Eac
E. Full Name, Mailing Address and ZIP Code George E. Mariani, Jr.		Name of Employer	day, year)	Receipt this Per
18 N. Pine Circle Belleair, FL 34616		Mariani Asphalt Co.	10/29/97	500
	General	vice-president		
Receipt For: X Primary	_ General	Aggregate Year-to-Date > \$	1,000.00	
Other (specify): F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Howard Marlowe 5530 Warwick Place		Marlowe & Company	10/27/97	500
Chevy Chase, MD 20815		Occupation		
Receipt For: X Primary	General	lobbyist Aggregate Year-to-Date > \$	500.00	
Other (specify):		1.55-5	Date (month,	Amount of Eac
G. Full Name, Mailing Address and ZIP Code Challis G. Marshall		Name of Employer	day, year)	Receipt this Pe
P. O. Box 801		self-employed	11/10/97	100
Winter Haven, FL 33882		Occupation		
Receipt For: X Primary	General	insurance		
Other (specify):		Aggregate Year-to-Date > \$	300.00	
			>	
BTOTAL of Receipts This Page (optional)	•••••			

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZiP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
John H. Marshall P. O. Box 1106	n/a	9/16/97	1,00
Boca Grande, FL 33921	Occupation retired		
Receipt For: X Primary Gene	Aggregate Year-to-Date > \$	1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this
John H. Marshall P. O. Box 1106	n/a	10/09/97	(1,00
Boca Grande, FL 33921 Receipt For: X Primary Gene	Occupation retired		redesig
Other (specify):	Aggregate Year-to-Date \$	1,000.00	
C. Full Name, Mailing Address and ZIP Code John H. Marshall	Name of Employer	Date (month, day, year)	Amount of Receipt this
P. O. Box 1106	n/a	10/09/97	1,00 redesig
Boca Grande, FL 33921 Receipt For: Primary X Gene			Idials
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Robert Martinez 4647 W. San Jose Street	Martinez Inatl.	11/05/97	5
Tampa, FL 33629	Occupation eral consultant		
Receipt For: X Primary Gen Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code Carnille Bares Massie	Name of Employer	Date (month, day, year)	Amount of Receipt this
501 High Street	n/a	12/23/97	2
Alexandria, VA 22302 Receipt For: X Primary Gen	Occupation housewife		
Other (specify):	Aggregate Year-to-Date > \$	250.00	
F. Full Name, Mailing Address and ZIP Code James D. Massie	Name of Employer	Date (month, day, year)	Amount of Receipt this
501 High Street	Alpine Group, Inc.	12/23/97	2
Alexandria, VA 22302 Receipt For: X Primary Ger	Occupation neral Consultant		
Other (specify):	Aggregate Year-to-Date > \$	250.00	
G. Full Name, Malling Address and ZIP Code C. Parkhill Mays, Jr.	Name of Employer	Date (month, day, year)	Amount of Receipt this
2109 Cambridge Avenue	Holland & Knight	10/30/97	1,0
Lakeland, FL 33803 Receipt For: X Primary Gen	Occupation neral attorney		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 94 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Parkhill Mays, Jr. 2109 Cambridge Avenue		Holland & Knight	11/25/97	(500.0
Lakeland, FL 33803		Occupation	7	redesignate
Receipt For: X Primary	General	attorney Aggregate Year-to-Date > \$	1,000,00	
Other (specify):		Name of Employer	Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code		Name of Employer	day, year)	Receipt this Perio
C. Parkhill Mays, Jr. 2109 Cambridge Avenue		Holland & Knight	11/25/97	500.0 redesignato
Lakeland, FL 33803		Occupation		ICICSIgiza
Receipt For: Primary	X General	Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	<u> </u>	Name of Employer	Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code		Hame of Employer	day, year)	Receipt this Perio
Robert R. Mazer 940 Brittany Road		n/a	10/29/97	500.0
Highland Park, IL 60035		Occupation		
Receipt For: X Primary	General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify): D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month,	Amount of Eacl
1			day, year)	Receipt this Peri
Elke M. McCoy 100 Cherry Street, Apt. 801		self-employed	8/06/97	250.
Panama City, FL 32401	General	realtor		
Receipt For: X Primary Other (specify):	L] General	Aggregate Year-to-Date > \$	250.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month,	Amount of Eac Receipt this Peri
D. Bruce McCraw, M.D.			day, year)	
1680 Texar Drive		Medical Center Clinic	7/23/97	100
Pensacola, FL 32503		Occupation		
Receipt For: Primary	X General	physician	400.00	
Other (specify):		Aggregate Year-to-Date \$	400.00 Date (month,	Amount of Eac
F. Full Name, Mailing Address and ZIP Code		Name of Employer	day, year)	Receipt this Per
Edgar W. McCurry, Jr. 3161 St. John's Bluff Rd. S., #4		self-employed	8/16/97	500
Jacksonville Beach, FL 32246		Occupation		
Receipt For: X Primary	General	Aggregate Year-to-Date > \$	500.00	
Other (specify):	<u> </u>	Name of Employer	Date (month,	Amount of Ea
G. Full Name, Mailing Address and ZIP Code		Haine of Employer	day, year)	Receipt this Pe
Wilford F. McDermitt		n/a	9/24/97	200
352 Hampton Hills Court Debary, FL 32713		Occupation		
	General	retired		
Receipt For: X Primary Other (specify):		Aggregate Year-to-Date > \$	250.00	

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A. Full Name, Mailing Address and ZIP (ode	Name of Employer	Date (month, day, year)	Amount of Receipt this
Wilford F. McDermitt			Gay, year)	t receibt mis
352 Hampton Hills Court		n/a	10/20/97	
Debary, FL 32713		Occupation		
Receipt For: X Prin	nary General	retired		
Other (specify):		Aggregate Year-to-Date \$	250.00	Amount of
B. Full Name, Mailing Address and ZIP	Code	Name of Employer	Date (month, day, year)	Receipt this
Sheila M. McDevitt			0.05.05	
3211 Swann Avenue, #201		TECO Energy, Inc.	8/27/97	
Tampa, FL 33609		Occupation		
Receipt For:	mary X General	corp. counsel Aggregate Year-to-Date > \$	1,000.00	
Other (specify):		Name of Employer	Date (month,	Amount o
C. Full Name, Mailing Address and ZIP	Code	Haine of Employer	day, year)	Receipt this
Ellice McDonald, Jr.		n/o	10/06/97	1,0
3801 Kennett Pike, C-300		n/a	10/00/5/	1,
Greenville, DE 19807	nany General	Occupation retired		
Receipt For: X Pri	mary General	Aggregate Year-to-Date > \$	0.00	
Other (specify): D. Full Name, Malling Address and ZIP	Code	Name of Employer	Date (month,	Amount o
Robert D. McDougal, III	= = #=		day, year)	Receipt thi
P. O. Box 410		Culligan Water Soft.	10/27/97	
Miami, FL 33133		Occupation		
Receipt For: X Pr	mary General	ceo		
Other (specify):	,	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP	Code	Name of Employer	Date (month, day, year)	Amount of Receipt the
Robert D. McDougal, III				•
P. O. Box 410		Culligan Water Soft.	11/16/97	(
Miami, FL 33133		Occupation		redes
Receipt For: X Pr	imary General	ceo		
Other (specify):		Aggregate Year-to-Date > \$	500.00	A
F. Full Name, Mailing Address and ZIF	Code	Name of Employer	Date (month, day, year)	Amount of Receipt th
Robert D. McDougal, III		G 111 TT : G A		
P. O. Box 410		Culligan Water Soft.	11/16/97	rede
Miami, FL 33133		Occupation		1616
Theodolph Control	imary X General	CEO Aggregate Year-to-Date > \$	500.00	
Other (specify):			Date (month,	Amount
G. Full Name, Mailing Address and ZI	P Code	Name of Employer	day, year)	Receipt th
John A. McIntyre		MoIntura Dohartu	10/27/97	1
9222 Wood Meadow Loop		McIntyre, Doherty		1
Bradenton, FL 34202	rimary General	Occupation construction		
	rimary General	Aggregate Year-to-Date > \$	100000	
Other (specify):				

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
John A. McIntyre			•
9222 Wood Meadow Loop	McIntyre, Doherty	12/12/97	(50
Bradenton, FL 34202	Occupation		redesig
Receipt For: X Primary General	construction Aggregate Year-to-Date > \$		
Other (specify):		1,000.00 Date (month,	Amount of E
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this f
John A. McIntyre	7.7.	10/10/07	5(
9222 Wood Meadow Loop	McIntyre, Doherty	12/12/97	redesig
Bradenton, FL 34202	Occupation		Teucaig
Receipt For: Primary X General	construction Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	1.93.13	Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
James W. McKee, Jr.	,	0/24/07	1,0
350 Sedgwick Court	n/a	9/24/97	1,0
Naples, FL 33963	Occupation		
Receipt For: X Primary General	retired Angregate Year-to-Date > \$	0.00	
Other (specify):	, 1991.09	0.00 Date (month,	Amount of
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
James W. McKee, Jr.	,	0/20/07	/1 / 1
350 Sedgwick Court	n/a	9/29/97	(1,0 reattr
Naples, FL 33963	Occupation		Italii
Receipt For: X Primary General	retired Angregate Year-to-Date > \$	0.00	
Other (specify):	7.55.05.00	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Jayne A. McKee	n to	9/29/97	1,0
350 Sedgwick Court	n/a	7147171	reattr
Naples, FL 33963	Occupation		ıcam
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	1 193		Amount of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
F. David McKinney	1 D 10 D	11/04/07	4
3039 Middlesex Road	J. Rolfe Davis	11/04/97	•
Orlando, FL 32803	Occupation		
Receipt For: X Primary General	insurance	500.00	
Other (specify):	Aggregate Year-to-Date > \$		Amount o
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Diane Kidd McNeel		11/17/07	
901 Mariner Way	Caribbean Basin Ind.	11/17/97	
Tampa, FL 33602	Occupation		
Receipt For: X Primary General	executive	500.00	
	Aggregate Year-to-Date > \$	500.00	I

ITEMIZED RECEIPTS

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

PAGE 58 OF 94 FOR LINE NUMBER

11ai

Receipt For: Other (specify): B. Full Name, Mailing Address and ZIP Code Van L. McNeel P. O. Box 23887 Tampa, FL 33623 Receipt For: Other (specify): C. Full Name, Mailing Address and ZIP Code Van L. McNeel P. O. Box 23887 Tampa, FL 33623 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	McNeel International ccupation executive ggregate Year-to-Date > \$ ame of Employer McNeel International ccupation executive ggregate Year-to-Date > \$ lame of Employer McNeel International ccupation executive lagregate Year-to-Date > \$ lame of Employer First Union Ccupation Ccupation Ccupation Executive Signedate Year-to-Date > \$ lame of Employer First Union Ccupation Circupation Ci	10/24/97 1,000.00 Date (month, day, year) 11/10/97 1,000.00 Date (month, day, year) 11/10/97 1,000.00 Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year) 11/2/24/97	Amount of Each Receipt this Period (1,000.0 reclessionate) Amount of Each Receipt this Period (1,000.0 reclessionate) Amount of Each Receipt this Period (1,500.0 reclessionate)
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Van L. McNeel P. O. Box 23887 Tampa, FL 33623 Receipt For: Other (specify): C. Full Name, Mailing Address and ZIP Code Van L. McNeel P. O. Box 23887 Tampa, FL 33623 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	McNeel International executive executive largegate Year-to-Date > \$ Itame of Employer McNeel International executive Executi	1,000.00 Date (month, day, year) 1,000.00 Date (month, day, year) 1,000.00 Date (month, day, year) 1,1/17/97 1,500.00 Date (month, day, year)	Amount of Each Receipt this Period 1,000.0 redesignate 1,000.0 redesignate 1,500.0 Amount of Each Receipt this Period 1,500.0 Amount Of Each Receipt this
P. O. Box 23887 Tampa, FL 33623 Receipt For:	Aggregate Year-to-Date \$ Stame of Employer McNeel International Decupation executive Aggregate Year-to-Date \$ Stame of Employer First Union Decupation director Aggregate Year-to-Date \$ Stame of Employer	1,000.00 Date (month, day, year) 11/10/97 1,000.00 Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year)	Amount of Each Receipt this Periodesignate Amount of Each Receipt this Periodesignate Amount of Each Receipt this Periodesignate 1,500.0
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Van L. McNeel P. O. Box 23887 Tampa, FL 33623 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	McNeel International Occupation executive Aggregate Year-to-Date > \$ Name of Employer First Union Occupation director Aggregate Year-to-Date > \$ Name of Employer	11/10/97 1,000.00 Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year)	Amount of Each Receipt this Periodesignated Amount of Each Receipt this Periodesignated Amount of Each Receipt this Periodesignated Amount of Each Amount of Each Amount of Each Amount of Each Receipt this Periodesignated Amount of Each Amount of Each Amount of Each Amount of Each Receipt this Periodesignated Receipt this Periodesigna
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Tampa, FL 33623 Receipt For: Primary X General Other (specify): D. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	Poccupation Executive Aggregate Year-to-Date > \$ Name of Employer First Union Doccupation director Aggregate Year-to-Date > \$ Name of Employer	1,000.00 Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year)	Amount of Each Receipt this Perio
Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	executive Aggregate Year-to-Date Same of Employer First Union Decupation director Aggregate Year-to-Date Same of Employer	Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year)	Amount of Each Receipt this Period 1,500.0
Other (specify): D. Full Name, Malling Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): E. Full Name, Malling Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Malling Address and ZIP Code J. Collier Merrill Other (specify): F. Full Name, Malling Address and ZIP Code J. Collier Merrill	First Union Decupation director Aggregate Year-to-Date > \$	Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year)	1,500.4
D. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	First Union Decupation director Aggregate Year-to-Date > \$	Date (month, day, year) 11/17/97 1,500.00 Date (month, day, year)	1,500.4
J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	First Union Decupation director Aggregate Year-to-Date > \$	11/17/97 1,500.00 Date (month, day, year)	1,500.4
P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	Occupation director Aggregate Year-to-Date > \$ Name of Employer	1,500.00 Date (month, day, year)	Amount of Eacl
Pensacola, FL 32593 Receipt For: X Primary General Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	Occupation director Aggregate Year-to-Date > \$ Name of Employer	1,500.00 Date (month, day, year)	Amount of Eacl
Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	director Aggregate Year-to-Date > \$ Name of Employer	Date (month, day, year)	
Other (specify): E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	Aggregate Year-to-Date > \$	Date (month, day, year)	
E. Full Name, Mailing Address and ZIP Code J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	Name of Employer	Date (month, day, year)	
J. Collier Merrill P. O. Box 710 Pensacola, FL 32593 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill		day, year)	
P. O. Box 710 Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	First Union	12/24/97	
Pensacola, FL 32593 Receipt For: X Primary General Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	First Union	12124191	(1,000.
Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill			redesigna
Other (specify): F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	Occupation		Totosigna
F. Full Name, Mailing Address and ZIP Code J. Collier Merrill	director	1500.00	
J. Collier Merrill	Aggregate Year-to-Date > \$	1,500.00	Amount of Eac
· •	Name of Employer	Date (month, day, year)	Receipt this Peri
I D O D 710	Cint I Inion	12/24/97	1,000
P. O. Box 710	First Union	14471	redesigna
Pensacola, FL 32593	Occupation		Tucagin
Receipt For: Primary X General	director	1500.00	
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	Amount of Eac
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
James Elliott Messer	38 375	0/04/07	500
P. O. Box 1876	Messer, Vickers et al	8/04/97	300.
Tallahassee, FL 32302	Occupation		
Receipt For: Primary X General	attorney	500.00	
Other (specify):	Aggregate Year-to-Date > \$	500.00	
SUBTOTAL of Receipts This Page (optional)	***************************************	>	

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

IE OF COMMITTEE (in Full)			
Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Robert F. Meyerson		33,, 104,	•
Captiva Drive	Telantis Corp.	10/14/97	1,000
Captiva, FL 33924	Occupation		
Receipt For: X Primary Gener	al chairman		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	A
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Robert F. Meyerson			(4.00
Captiva Drive	Telantis Corp.	11/24/97	(1,000
Captiva, FL 33924	Occupation		redesign
Receipt For: X Primary Gener		1 000 00	
Other (specify):	Aggregate Year-to-Date > \$	1,000.00 Date (month,	Amount of E
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Po
Robert F. Meyerson	Tolonia Com	11/24/97	1,00
Captiva Drive	Telantis Corp.	11/24/9/	redesign
Captiva, FL 33924	Occupation		Tulwigi
Receipt For: Primary X Gener	ral Chairman Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
D. Full Name, Mailing Address and ZIP Code	reality of employer	day, year)	Receipt this P
Anthony D. Migliore	self-employed	10/01/97	1,00
3949 Evans Avenue, Suite 102			-,
Ft. Myers, FL 33901	Occupation anesthesiologist		
Heceipt For.	Aggregate Year-to-Date > \$	1,000.00	
Other (specify): E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this F
Vera M. Milner		day, year)	
P. O. Box 4617	n/a	10/21/97	25
Dowling Park, FL 32060	Occupation		
Receipt For: X Primary Gene	eral retired		
Other (specify):	Aggregate Year-to-Date > \$	250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of B Receipt this B
Vera M. Milner			·
P. O. Box 4617	n/a	11/26/97	(2.
Dowling Park, FL 32060	Occupation		redesig
Receipt For: X Primary Gen		050.00	
Other (specify):	Aggregate Year-to-Date > \$	250.00	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of I Receipt this
Vera M. Milner	,		2:
P. O. Box 4617	n/a	11/26/97	redesig
Dowling Park, FL 32060	Occupation		TOTAL
Heceipt For.	neral retired Aggregate Year-to-Date > \$	250.00	
Other (specify):	Aggregate Teal-to-Date	4111	

ITEMIZED RECEIPTS

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

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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.

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harland L. Mischler 17037 Brookwood Drive		HLM Capital Resources	11/06/97	500.0
Boca Raton, FL 33496		Occupation	-	
	General	investments		
Other (specify):		Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
Mary Lee Montgomery 6958 Verde Way		Montgomery Eye Center	10/16/97	1,000.0
Naples, FL 34108	Conomi	Occupation health care adm.		
Receipt For: X Primary	General	Aggregate Year-to-Date > \$	1,000.00	
Other (specify): C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
Charles J. Montgomery, M.D. 6958 Verde Way		Montgomery Eye Center	10/16/97	1,000.
Naples, FL 34108	General	Occupation physician		
Receipt For: X Primary	General	Aggregate Year-to-Date > \$	1.000.00	
Other (specify): D. Full Name, Mailing Address and ZIP Code	 -—	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Raymond C. Moore 19241 S.W. Conners Hwy.		U.S. Sugar Corp.	12/12/97	250
Canal Point, FL 33438		Occupation		
Receipt For: X Primary Other (specify):	General	farmer Aggregate Year-to-Date > \$	250.00	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Stephen C. Moore P. O. Box 9500		Steve Moore Chevrolet	7/30/97	1,000
Lake Worth, FL 33466		Occupation	1	
Receipt For: Primary X	General	sales Aggregate Year-to-Date > \$	500.00	
Other (specify): F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Ear Receipt this Pe
Stephen C. Moore P. O. Box 9500		Steve Moore Chevrolet	9/25/97	(500
Lake Worth, FL 33466	To .	Occupation sales	_	reattribu
Receipt For: Primary X Other (specify):	General	Aggregate Year-to-Date > \$	500.00	
G. Full Name, Mailing Address and ZIP Code	 	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Cathy Moore P. O. Box 9500		n/a	9/25/97	500
Lake Worth, FL 33466	Ganami	Occupation housewife		reattrib
Receipt For: X Primary Other (specify):	General	Aggregate Year-to-Date > \$	500.00	
BTOTAL of Receipts This Page (optional)				

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

A. Full Name, Mailing Address	and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
John J. Morrison			self ampleyed	9/22/97	300
	531 Indian Harbor Road		self-employed	- 314431	300
Vero Beach, FL 3296		eneral	Occupation		
Receipt For: Other (specify):	X Filling C	onora.	Aggregate Year-to-Date > \$	400.00	
B. Full Name, Mailing Address	and ZIP Code		Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Frank L. Morsani				uay, year,	•
4600 N. Dale Mabry,	Suite 200		Precision Motor Cars	10/30/97	50
Tampa, FL 33614			Occupation		
Receipt For:	X Primary G	General	owner	500.00	
Other (specify):			Aggregate Year-to-Date \$	500.00 Date (month,	Amount of E
C. Full Name, Mailing Address	and ZIP Code		Name of Employer	day, year)	Receipt this F
John H. Morse	D.: 400E		n/a	7/28/97	10
16301 Fairway Woods	DIVE, #800				
Ft. Myers, FL 33908	Y Primary	Seneral	Occupation retired		
Receipt For: Other (specify):	X Primary G	1011C1C1	Aggregate Year-to-Date > \$	300.00	
D. Full Name, Mailing Address	and ZIP Code		Name of Employer	Date (month, day, year)	Amount of E Receipt this F
John H. Morse				uay, year,	•
16301 Fairway Wood	Drive, #805		n/a	10/22/97	10
Ft. Myers, FL 33908			Occupation		
Receipt For:		General	retired	200.00	
Other (specify):			Aggregate Year-to-Date > \$	300.00 Date (month,	Amount of
E. Full Name, Mailing Address	_		Name of Employer	day, year)	Receipt this
Patterson W. Moseley	, M.D.		Cardio Surgeons, P.A.	10/30/97	1,0
630 Dunmar Circle	2708				•
Winter Springs, FL		General	Occupation physician		
Receipt For: Other (specify):	Ty runary		Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address	and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Receipt this
John Scot Mueller					·
4601 Gulf Shore Blvd	l., N., #16		Relleum, Inc.	10/22/97	1,0
Naples, FL 34103			Occupation		
Receipt For:	X Primary	General	president Aggregate Year-to-Date > \$	1.000.00	
Other (specify):			1.93.53	Date (month,	Amount of
G. Full Name, Mailing Address	s and ZIP Code		Name of Employer	day, year)	Receipt this
John Scot Mueller	1 NI #16		Relleum, Inc.	11/15/97	(1,0
4601 Gulf Shore Blv	ı., N., #10		Occupation		redesi
Naples, FL 34103	X Primary	General	president		-
Receipt For: Other (specify)			Aggregate Year-to-Date > \$	1.000.00	

ITEMIZED RECEIPTS

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

PAGE OF 94 FOR LINE NUMBER

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) Friends of Connie Mack Amount of Each Name of Employer Date (month, A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John Scot Mueller 1.000.00 Relleum, Inc. 11/15/97 4601 Gulf Shore Blvd., N., #16 redesignated Naples, FL 34103 Occupation Primary X General president Receipt For: Aggregate Year-to-Date 1.000.00 Other (specify): Amount of Each Name of Employer Date (month. B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Ronald J. Mueller 500.00 10/30/97 Volva & Mazda Village 13525 U.S. 19 South Clearwater, FL 34624 Occupation auto dealer X Primary General Receipt For: Aggregate Year-to-Date > \$.000.000 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Ronald J. Mueller (500.00)11/13/97 Volva & Mazda Village 13525 U.S. 19 South redesignated Clearwater, FL 34624 Occupation auto dealer X Primary Receipt For: Aggregate Year-to-Date 000.000 Other (specify): Amount of Each Name of Employer Date (month, D. Full Name, Mailing Address and ZIP Code day, year) Receipt this Period Ronald J. Mueller 500.00 11/13/97 Volva & Mazda Village 13525 U.S. 19 South redesignated Clearwater, FL 34624 Occupation auto dealer X General Primary Receipt For: Aggregate Year-to-Date .000.000 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) James E. Murray 1,000.00 10/30/97 Humana, Inc. 2105 Croghan Cross 30 Louisville, KY 40207 Occupation 0 chief fin. officer General Receipt For: X Primary Aggregate Year-to-Date .000.000. Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John C. Myers, III 500.00 8/04/97 2099 E. Winterbourne, Unit 205 Reinhold Corp. Orange Park, FL 32073 Occupation president General Receipt For: X Primary 500.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, G. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Muni L. Narayan 500.00 10/20/97 Fla. Cardio Consult. 2440 Kent Place, S. Clearwater, FL 34624 Occupation X General physician Receipt For: Primary Aggregate Year-to-Date 1.000.00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

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

OF 94 PAGE FOR LINE NUMBER

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.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Deanna D. Natarajan			2.000
7321 Midnight Pass Road	n/a	10/30/97	2,000.
Sarasota, FL 34242	Occupation		
Receipt For: X Primary General	homemaker Aggregate Year-to-Date > \$	2,000,00	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac
		day, year)	Receipt this Per
Deanna D. Natarajan 7321 Midnight Pass Road	n/a	11/11/97	(1,000
Sarasota, FL 34242	Occupation		redesigna
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			J
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	2.000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac Receipt this Per
Deanna D. Natarajan		day, year)	•
7321 Midnight Pass Road	n/a	11/11/97	1,000
Sarasota, FL 34242	Occupation		redesigna
Receipt For: Primary X General	homemaker		
Other (specify):	Aggregate Year-to-Date S	2.000.00	Amount of Ear
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Per
P. Natarajan, M.D.		0/00/07	1 000
7321 Midnight Pass Road	self-employed	9/08/97	1,000
Sarasota, FL 34242	Occupation		
Receipt For: Primary X General	physician Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Maine of Employer	day, year)	Receipt this Pe
Richard E. Nelson	Nelson, Hesse et al	10/08/97	1,000
2070 Ringling Blvd. Sarasota, FL 34237			,
	Occupation		
Receipt For: Other (specify): Genera	Aggregate Year-to-Date > \$	0.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
Richard E. Nelson		day, year)	neceipt titls re
2070 Ringling Blvd.	Nelson, Hesse et al	10/16/97	(1,000
Sarasota, FL 34237	Occupation		reattrib
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	0.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Jane B. Nelson			1 000
5225 Hidden Harbor Road	n/a	10/16/97	1,000 reattrib
Sarasota, FL 34242	Occupation		16411110
Receipt For: X Primary General	homemaker Aggregate Year-to-Date > \$	1000.00	
Other (specify):	Aggregate real-to-bate		

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 64 | 94
FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea
Eleanor Forde Newton		day, year)	ricosipi tilia Pe
P. O. Box 6700	n/a	7/21/97	75
Ft. Myers Beach, FL 33932	Occupation		
Receipt For: Primary X Genera			
Other (specify):	Aggregate Year-to-Date \$	1,750.00	Amount of E
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this P
Russell B. Newton, Jr.		11/06/07	1 00
P. O. Box 52898	self-employed	11/06/97	1,00
Jacksonville, FL 32201	Occupation		
Receipt For: X Primary General	private investor Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
C. Full Name, Mailing Address and ZIP Code	ranie oi Cinpioje	day, year)	Receipt this P
Russell B. Newton, Jr.	self-employed	12/24/97	(50
P. O. Box 52898			redesign
Jacksonville, FL 32201	Occupation private investor		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E
Russell B. Newton, Jr.		day, year)	Receipt this F
P. O. Box 52898	self-employed	12/24/97	50
Jacksonville, FL 32201	Occupation		redesig
Receipt For: Primary X General			_
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Kay D. O'Rourke			•
17812 Willow Lake Drive	Tradimon Ranch, Inc.	7/14/97	4.
Odessa, FL 33556	Occupation		
Receipt For: Primary X General			
Other (specify):	Aggregate Year-to-Date > \$	750.00	America of F
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this I
Walter Obermayer		OIDEINT	1:
2623 Northside Drive	n/a	8/05/97	1.
Lantana, FL 33462	Occupation		
Receipt For: X Primary Gener	al retired Aggregate Year-to-Date > \$	460.00	
Other (specify):		Date (month,	Amount of I
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Walter Obermayer	7/0	11/05/97	1
2623 Northside Drive	n/a		1
Lantana, FL 33462	Occupation al retired		
Receipt For: X Primary Gener	Aggregate Year-to-Date > \$	460.00	
Other (specify).			

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 65 OF 94 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
W. Guy Odum, Jr.		day, year,	•
200 Executive Way	Odum Properties	7/21/97	1,00
Ponte Vedra Beach, FL 32082	Occupation		
Receipt For: Primary X Gener	al timber Aggregate Year-to-Date > \$	1,000,00	
Other (specify):		1,000.00 Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Anthony Okonmah	OV Comm. Somions	10/30/97	5
P. O. Box 680236	OK Comm. Services	10/30/97	٠,
Miami, FL 33168	Occupation research scientist		
Receipt For: X Primary Gener	Aggregate Year-to-Date > \$	1.000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Anthony Okonmah		day, year)	Receipt this
P. O. Box 680236	OK Comm. Services	11/20/97	(5
Miami, FL 33168	Occupation		redesig
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Anthony Okonmah			
P. O. Box 680236	OK Comm. Services	11/20/97	
Miami, FL 33168	Occupation		redesi
Receipt For: Primary X Gene	ral research scientist Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Louis P. Ortiz P. O. Box 20929	McNulty, Garcia&Ortiz	10/08/97	1,0
St. Petersburg, FL 33742	Occupation		,
Receipt For: X Primary Gene	OD 4		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
Shepard Osherow		day, year)	·
433 Plaza Real, Suite 365	n/a	9/22/97	2
Boca Raton, FL 33432	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
Robert Oster			
N-9399 E. Shore Road	Deltrol Controls	10/14/97	
Mukwonago, WI 53149	Occupation		
Receipt For: X Primary Gene	eral executive Aggregate Year-to-Date > \$	0.00	
Other (specify):	1.05-5	17.187	

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

Mukwonago, WI 53149 Receipt For:	tion emaker ate Year-to-Date \$ f Employer	11/26/97 0.00 Date (month, day, year) 11/26/97 500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year) 9/24/97	Amount of Each Receipt this Period Amount of Each Receipt this Period Amount of Each Receipt this Period 1,000.00 Amount of Each Receipt this Period 500.00
N-9399 E. Shore Road Mukwonago, WI 53149 Receipt For:	tion territore t	0.00 Date (month, day, year) 11/26/97 500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: X Primary General EXECUTED COTHER (Specify): Aggrey	tion emaker ate Year-to-Date \$ f Employer	Date (month, day, year) 11/26/97 500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year)	Amount of Each Receipt this Period 500.00 reaftributed Amount of Each Receipt this Period 1,000.00 Amount of Each Receipt this Period
Other (specify): X Primary General EXECOMENTED Code	tion emaker ate Year-to-Date \$ f Employer	Date (month, day, year) 11/26/97 500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year)	Amount of Each Receipt this Period
Other (specify): 3. Full Name, Mailing Address and ZIP Code Mrs. Robert Oster N-9399 E. Shore Road Mukwonago, WI 53149 Receipt For: Other (specify): C. Full Name, Mailing Address and ZIP Code Susan M. Ottenstroer 3025 Bishop Estates Road Jacksonville, FL 32259 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Other (specify): Aggre	f Employer ion emaker ate Year-to-Date > \$ if Employer tion ate Year-to-Date > \$ ate Year-to-Date > \$ if Employer	Date (month, day, year) 11/26/97 500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year)	Amount of Each Receipt this Period
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Mrs. Robert Oster N-9399 E. Shore Road Mukwonago, WI 53149 Receipt For: Other (specify): C. Full Name, Mailing Address and ZIP Code Susan M. Ottenstroer 3025 Bishop Estates Road Jacksonville, FL 32259 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cither (specify): E. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cither (specify): E. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cither (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cither (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cother (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cother (specify): F. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: Cother (specify): Primary X General Receipt For: Cother (specify): Receipt For: Cother (specify): Co	tion tion tien Year-to-Date ste Year-to-Date ste Year-to-Date ste Year-to-Date	500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year)	Amount of Each Receipt this Period Amount of Each Receipt this Period
N-9399 E. Shore Road Mukwonago, WI 53149 Receipt For: Other (specify): C. Full Name, Mailing Address and ZIP Code Susan M. Ottenstroer 3025 Bishop Estates Road Jacksonville, FL 32259 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: E. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Full Name, Mailing Address and ZIP Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Frimary C. General C. Cocuption of the Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Frimary C. General C. Cocuption of the Code Ashley D. Pace, Jr. 615 Bayshore Dr., Apt. 1001 Pensacola, FL 32507 Receipt For: C. Frimary C. General C. Cocuption of the Code Ashley As	tion tion tien Year-to-Date ste Year-to-Date ste Year-to-Date ste Year-to-Date	500.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year)	Amount of Each Receipt this Period 1,000.00 Amount of Each Receipt this Period
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Other (specify): Aggr	ation red		J
Cute. (cpcs./)	gate Year-to-Date > \$	1,000.00	
G. Full Name, Mailing Address and Zir Code	of Employer	Date (month,	Amount of Eac
i .		day, year)	Receipt this Peri
Kenneth E. Padgett P. O. Box 3444		11/10/97	1,000
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Aggregation	ation	1 000 00	
Other (specify):			

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 67 OF 94 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Raymond S. Page, Jr.	,	701/07	1
Mill Creek Terrace	n/a	7/21/97	1
Gladwyne, PA 19035 Beceipt For: Primary X Gen	Occupation retired		
Receipt For: Primary X Gen Other (specify):	Aggregate Year-to-Date > \$	400.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Raymond S. Page, Jr.		uay, year,	•
Mill Creek Terrace	n/a	10/16/97	1
Gladwyne, PA 19035	Occupation		
Receipt For: X Primary Ger	neral retired Aggregate Year-to-Date > \$	400.00	
Other (specify):	199-3	400,00 Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Raymond S. Page, Jr. Mill Creek Terrace	n/a	11/23/97	(1
Gladwyne, PA 19035	Occupation		redesi
	neral retired		
Other (specify):	Aggregate Year-to-Date > \$	400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
Raymond S. Page, Jr.			
Mill Creek Terrace	n/a	11/23/97	ادم المساد المماليمية
Gladwyne, PA 19035	Occupation		redes
neceipt rot.	neral retired Aggregate Year-to-Date > \$	400.00	
Other (specify): E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Jeno F. Paulucci		day, year)	Receipt thi
201 W. First Street	Paulucci Pizza	10/06/97	1,
Sanford, FL 32771	Occupation		
	neral president		
Other (specify):	Aggregate Year-to-Date > \$	1.750.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt thi
Jeno F. Paulucci	Darkers' Direct	10/06/97	1,
201 W. First Street	Paulucci Pizza	10/00/97	1,
Sanford, FL 32771 Receipt For: Primary X Ge	Occupation eneral president		
Receipt For: Primary X Ge	Aggregate Year-to-Date > \$	1,750.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Leonard R. Pavelka		day, year)	Receipt th
4966 Ortega Blvd.	J. H. Churchwell Co.	9/22/97	1
Jacksonville, FL 32210	Occupation		
Receipt For: Primary X G	eneral president	1,000,00	
Other (specify):	Aggregate Year-to-Date > S	1,000,00	

ITEMIZED RECEIPTS

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

7/21/97

500.00

PAGE 94 FOR LINE NUMBER

11ai 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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Paul L. Paver 500.00 9/26/97 Paver Dev. Corp. 3977 Roberts Point Road Sarasota, FL 34242 Occupation general contractor General Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Lowell W. Paxson 1,000.00 11/24/97 Paxson Broadcasting 780 S. Ocean Blvd. Palm Beach, FL 33480 Occupation radio X Primary General Receipt For: Aggregate Year-to-Date .000.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Paula Pendergast 2,000.00 10/29/97 Jerry's, Inc. 576 E. Rambling Drive West Palm Beach, FL 33414 Occupation vice-president X Primary General Receipt For: Aggregate Year-to-Date > \$.000.000Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Paula Pendergast (1,000.00)11/28/97 Jerry's, Inc. 576 E. Rambling Drive redesignated West Palm Beach, FL 33414 Occupation vice-president General X Primary Receipt For: Aggregate Year-to-Date 1.000.00 Other (specify): Amount of Each Date (month. Name of Employer E. Full Name, Malling Address and ZIP Code Receipt this Period day, year) Paula Pendergast 1,000.00 11/28/97 Jerry's, Inc. 576 E. Rambling Drive redesignated West Palm Beach, FL 33414 Occupation X General vice-president Primary Receipt For: Aggregate Year-to-Date > \$ 1,000.00 Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Samuel A. Penninger, Jr. 300.00 11/24/97 Serologicals, Inc. 1034 Wetherby Way Alpharetta, GA 30202 Occupation executive General X Primary Receipt For: 300.00 Aggregate Year-to-Date Other (specify): Amount of Each Name of Employer Date (month, G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Michael J. Petrina 250.00

n/a

X General

Primary

Occupation

retired

Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)

100 Royal Palm Way Palm Beach, FL 33480

Receipt For:

TOTAL This Period (last page this line number only)

Other (specify):

ITEMIZED RECEIPTS

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

PAGE 69 OF 94 FOR LINE NUMBER

Friends of Connie Mack			
	Name of Employer	Date (month,	Amount of Eac
A. Full Name, Mailing Address and ZIP Code	Manio S. Linpie, C.	day, year)	Receipt this Peri
Michael J. Petrina		10/20/97	100
100 Royal Palm Way	n/a	10/20/97	100
Palm Beach, FL 33480	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify):	1.93.09	Date (month,	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
Mrs. Michael J. Petrina	,	7/00/07	250
100 Royal Palm Way	n/a	7/28/97	230
Palm Beach, FL 33480	Occupation		
Receipt For: X Primary General	none	250.00	
Other (specify):	Aggregate Year-to-Date \$	350.00 Date (month,	Amount of Eac
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
Mrs. Michael J. Petrina		0/15/05	100
100 Royal Palm Way	п/а	9/15/97	100
Palm Beach, FL 33480	Occupation		
Receipt For: X Primary General	none	270.00	
Other (specify):	Aggregate Year-to-Date S	350.00 Date (month,	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pe
Roy Pfautch		10.10.10	1 000
52 Portland Place	Civic Service, Inc.	10/31/97	1,000
St. Louis, MO 53408	Occupation		
Receipt For: X Primary General	consultant		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
Sam Pivar		50.105	20
1100 Ben Franklin Drive, Apt, 702	n/a	7/24/97	20
Sarasota, FL 34236	Occupation		
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	300.00	A
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Judd L. Pollock			20
21 Greenleaf Avenue	n/a	9/24/97	20
Darien, CT 06820	Occupation		
Receipt For. X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
F. Wallace Pope, Jr.			-
P. O. Box 1368	Johnson, Blakely	7/14/97	50
Clearwater, FL 34617	Occupation		
Receipt For: Primary X General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	10000	
			1

ITEMIZED RECEIPTS

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

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11ai

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Daniel B. Pope, M.D. 316 77th Street, N.W.	self-employed	9/03/97	50
Bradenton, FL 34209	Occupation		
Receipt For: Primary X General	physician		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Fitzhugh K. Powell		7/14/07	5
P. O. Drawer 41490	n/a	7/14/97	بر
Jacksonville, FL 32203	Occupation		
Receipt For: Primary X General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	rains of Employee	day, year)	Receipt this
Mark A. Proctor 409 S. Kings Avenue	Proctor Corp.	11/04/97	5
Brandon, FL 33511	Occupation		
	real estate		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Jason K. Psaltides			·
3703 N.E. 166 Street, #606	Psaltides & Assoc.	8/04/97	5
N. Miami Beach, FL 33160	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	500.00	
Other (specify):		Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
R. Bradford Pyle, M.D.	self-employed	10/14/97	1,0
4531 N. Davis Highway, Bldg. 2 Pensacola, FL 32503	Occupation		
Lyl z	physician		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o Receipt this
R. Bradford Pyle, M.D.		day, year)	•
4531 N. Davis Highway, Bldg. 2	self-employed	11/14/97	() ()
Pensacola, FL 32503	Occupation		redes
Receipt For: X Primary General	physician	100000	
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	Amount o
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt thi
R. Bradford Pyle, M.D.	self-employed	11/14/97	
4531 N. Davis Highway, Bldg. 2			redes
Pensacola, FL 32503	Occupation physician		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	1,000,00	
Other (specify).			

ITEMIZED RECEIPTS

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

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A. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
John H. Quinn			•
P. O. Box 941539	self-employed	10/24/97	500
Maitland, FL 32794	Occupation		
Receipt For: Primary X General	investments Aggregate Year-to-Date > \$	1,000,00	
Other (specify):	Name of Employer	Date (month,	Amount of E
B. Full Name, Mailing Address and ZIP Code	reality of Employo	day, year)	Receipt this Po
Ellis M. Ramsdell	n/a	7/21/97	10
6790 S.W. 72nd Court			
Miami, FL 33143	Occupation retired		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
Alberto S. Recio		day, year)	•
400 N. Flagler Drive, #2002	Flo-Sun, Inc.	11/17/97	1,00
West Palm Beach, FL 33401	Occupation	-	
Receipt For: X Primary General	vice-president		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	Amount of E
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this F
Jerry D. Reese, M.D.	-	10/20/07	1,00
11823 Lakestone Way	Humana, Inc.	10/30/97	1,00
Prospect, KY 40059	Occupation		
Receipt For: X Primary General	sr. vice-president Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	, action or with 19.	day, year)	Receipt this
Allen N. Reeves	Reeves Motorcars	8/20/97	2:
4922 Chariton Avenue	Occupation		
Tampa, FL 33603 Receipt For: X Primary General	car dealer		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
James A. Reeves, Jr., M.D.		1	•
1331 Longwood Drive	Assoc. in Hematology	10/29/97	5
Ft. Myers, FL 33919	Occupation		
Receipt For: X Primary General	physician	500.00	
Other (specify):	Aggregate Year-to-Date > \$	500.00	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Dale R. Regnier	7 mm 1 f	11/04/07	5
981 Wittman Drive	LTP Management	11/04/97	`
Ft. Myers, FL 33919	Occupation director		
Receipt For: X Primary General	marketing director Aggregate Year-to-Date > \$	500.00	
Other (specify):			

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 72 OF 94 FOR LINE NUMBER

A. Fuil Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Fred A. Reisman			•
5151 Collins Avenue, #433-E	n/a	10/09/97	1,00
Miami Beach, FL 33140	Occupation		
Receipt For: X Primary General			
Other (specify):	1.555	1,050.00	Amount of I
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this f
Fred A. Reisman			/1/
5151 Collins Avenue, #433-E	n/a	11/15/97	(13
Miami Beach, FL 33140	Occupation		redesig
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	1.050.00	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this i
Fred A. Reisman		11/15/05	1/
5151 Collins Avenue, #433-E	n/a	11/15/97	13 modesia
Miami Beach, FL 33140	Occupation		redesig
Receipt For: Primary X Gener	al retired Aggregate Year-to-Date > \$	1.050.00	
Other (specify):	Name of Employer	1.050.00 Date (month,	Amount of
D. Full Name, Mailing Address and ZIP Code	Manie of Employer	day, year)	Receipt this
Beatrice N. Richards	l mtn	7/20/07	2
243 Ocean Drive	n/a	7/28/97	20
Jupiter, FL 33469	Occupation		
Receipt For: Primary X Gener	ral NONE Aggregate Year-to-Date > \$	650.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	ranc or employee	day, year)	Receipt this
Beatrice N. Richards	n/a	10/24/97	1
243 Ocean Drive			•
Jupiter, FL 33469	Occupation none		
Receipt For: X Primary Gene Other (specify):	Aggregate Year-to-Date > \$	650,00	
	Name of Employer	Date (month,	Amount of
F. Full Name, Mailing Address and ZIP Code Beatrice N. Richards		day, year)	Receipt this
243 Ocean Drive	n/a	11/20/97	(1
Jupiter, FL 33469	Occupation		redesig
			`
Receipt For: X Primary Gene Other (specify):	Aggregate Year-to-Date > \$	650.00	<u></u>
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Beatrice N. Richards		day, year)	Receipt this
243 Ocean Drive	n/a	11/20/97	1
Jupiter, FL 33469	Occupation		redesi
Receipt For: Primary X Gene			
Other (specify):	Aggregate Year-to-Date > \$	650.00	

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 73 OF 94 FOR LINE NUMBER

. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John F. Rinehart			
17635 Seidner Road	Glatting Jackson	11/04/97	500.0
Winter Garden, FL 34787	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	500.00	Amount of Each
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Perior
Randal L. Ringhaver			* 000 0
P. O. Box 45022	Ring Power Corp.	10/24/97	1,000.0
Jacksonville, FL 32232	Occupation		
Receipt For: X Primary Gen			
Other (specify):	Aggregate Year-to-Date S	1.000.00	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peno
P. N. Risser, III			£00 C
2865 Executive Drive	Risser Oil Corp.	7/17/97	500.0
Clearwater, FL 34622	Occupation		
Receipt For: Primary X Gen		1.000.00	
Other (specify):	Aggregate Year-to-Date > \$	1,000,00 Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Maureen A. Rorech		10.105.105	1 000 (
3105 W. Watrous	n/a	10/27/97	1,000.0
Tampa, FL 33629	Occupation		
Receipt For: X Primary Ger	neral NOTE Aggregate Year-to-Date > \$	1 000 00	
Other (specify):	Aggregate 1521 to 5215	1,000,00 Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
Frederick M. Rothenberg	TY II . 1 0 TZ-i-l-4	10/28/97	1,000.0
1817 Bayshore Blvd.	Holland & Knight	10/28/97	1,000.
Tampa, FL 33606	Occupation		
Receipt For:	neral attorney Aggregate Year-to-Date \$	900.00	
Other (specify):		Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pen
James P. Rowan	Whatesheet Com	11/10/97	500.
4200 Wackenhut Drive, #100	Wackenhut Corp.		200.
Palm Beach Gardens, FL 33410	Occupation		
Heceipt Foi.	neral vice-president Aggregate Year-to-Date > \$	500.00	
Other (specify):		Date (month,	Amount of Eac
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peri
Herbert J. Rowe	7/0	10/27/97	1,000.
4601 Gulf Shore Blvd., N., #12	n/a		_,
Naples, FL 33940	Occupation		
Receipt Pol.	retired Aggregate Year-to-Date > \$	376.00	
Other (specify):			

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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) Friends of Connie Mack Name of Employer Date (month, Amount of Each A. Full Name, Mailing Address and ZiP Code day, year) Receipt this Period Herbert J. Rowe (1,000.00)11/06/97 n/a 4601 Gulf Shore Blvd., N., #12 reattributed Naples, FL 33940 Occupation General X Primary retired Receipt For. Aggregate Year-to-Date 376.00Other (specify): Amount of Each Name of Employer Date (month. B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Anna M. Rowe 564.00 11/06/97 4601 Gulf Shore Blvd., N., #12 n/a reattributed Naples, FL 33940 Occupation retired General Receipt For: X Primary Aggregate Year-to-Date 436.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Anna M. Rowe 436.00 11/06/97 n/a 4601 Gulf Shore Blvd., N., #12 reattributed Naples, FL 33940 Occupation retired Primary X General Receipt For: Aggregate Year-to-Date 436.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Malling Address and ZIP Code Receipt this Period day, year) David H. Rush 1.000.00 9/17/97 Rush Holdings, Inc. 700 N.W. 12th Avenue 0 Deerfield Beach, FL 33442 Occupation president General Receipt For: X Primary Aggregate Year-to-Date 0.00 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) **C.**` David H. Rush (600.00)Rush Holdings, Inc. 11/10/97 700 N.W. 12th Avenue ာ reattributed Deerfield Beach, FL 33442 Occupation president X Primary General Receipt For: Aggregate Year-to-Date 0.00Other (specify): Amount of Each Name of Employer Date (month, F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Mariam Rush 600.00 11/10/97 n/a 700 N.W. 12th Avenue reattributed Deerfield Beach, FL 33442 Occupation X General housewife Receipt For: 600.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Donald Russell 1,000.00 10/30/97 Communications Equity 206 Blanca Tampa, FL 33606 Occupation X Primary fund manager General Receipt For: Aggregate Year-to-Date <u> 1 000 00</u> Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
Richard P. Ryan			150.0
1 Sandestin Estates	n/a	10/16/97	150.0
Destin, FL 32541	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	300.00	
Other (specify):		Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Milton S. Sager	10 1	10/22/97	100.0
1835 S.E. Fourth Street	self-employed	10/22/97	100.0
Cape Coral, FL 33990	Occupation		
Receipt For: X Primary General	lawn sprklr svc Aggregate Year-to-Date > \$	300.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
C. W. Sahiman	California Conforda	10/14/97	1,000.0
1601 Sahlman Drive	Sahlman Seafoods	10/14/3/	1,000.
Tampa, FL 33605	Occupation		
Receipt For: X Primary General	executive Aggregate Year-to-Date > \$	1,000,00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
D. Full Name, Mailing Address and ZIP Code	Name of Employee	day, year)	Receipt this Peri
David L. Saint, M.D.	and anominated	11/06/97	250.
2407 Troland Road	self-employed	11/00/5/	
Tallahassee, FL 32312	Occupation		
Receipt For: X Primary General	physician Aggregate Year-to-Date > \$	250.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
E. Fuil Name, Mailing Address and ZIP Code	Name of Employe.	day, year)	Receipt this Per
Jay S. Salby	Inatl Contractors Clb	10/16/97	500
801 N. Venetian Drive			
Miami, FL 33139	Occupation		
Receipt For: X Primary General	Aggregate Year-to-Date S	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
F. Full Name, Mailing Address and ZIP Code	realite of Employee	day, year)	Receipt this Per
Jay S. Salby	Inati Contractors Clb	11/15/97	(500
801 N. Venetian Drive			redesigna
Miami, FL 33139	Occupation executive		
Hecelpt For:	Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
G. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Pe
Jay S. Salby	Inati Contractors Clb	11/15/97	500
801 N. Venetian Drive	Occupation		redesign
Miami, FL 33139	` <u>,</u> ,		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	500.00	
Other (specify).			-

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles R. Savidge		000/07	500.00
P. O. Box 8400	n/a	9/22/97	300.00
Longboat Key, FL 34228	Occupation		
Receipt For: Primary X General Other (specify):	retired Aggregate Year-to-Date > \$	1.000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Each Receipt this Period
Stuart L. Scharaga		day, year)	•
P. O. Box 31599	Blu-Aqua Equities	11/24/97	500.0
Palm Beach Gardens, FL 33420	Occupation		
Receipt For: Primary X Genera			
Other (specify):	Aggregate Year-to-Date \$	1.000.00	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Period
Susan V. V. Scott		11/10/07	1,000.0
1615 Barcelona Way	self-employed	11/10/97	1,000.0
Winter Park, FL 32789	Occupation		
Receipt For: X Primary General	Surgeon Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Howard A. Seider, Jr., M.D.	self-employed	11/10/97	200.0
6108 Shore Acres	Occupation		
Bradenton, FL 34209			
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month.	Amount of Each Receipt this Peri
Betty S. Sembler		day, year)	•
10324 Paradise Blvd.	n/a	10/22/97	1,000.
Treasure Island, FL 33706	Occupation		
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	2.000.00	Amount of Eac
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
Betty S. Sembler	,	10/00/07	1,000
10324 Paradise Blvd.	n/a	10/22/97	1,000
Treasure Island, FL 33706	Occupation		
Receipt For: Primary X Gene	ral NONC Aggregate Year-to-Date \$	2,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
G. Full Name, Mailing Address and ZIP Code	Name of Employee	day, year)	Receipt this Per
Brent Sembler 7741 Hunter Lane	The Sembler Company	11/04/97	1,000
	Occupation		
Pinellas Park, FL 33782 Receipt For: X Primary Gene			
Receipt For: X Primary Gene	Aggregate Year-to-Date > \$	1.000.00	
			İ

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Elizabeth M. Sembler		day, year,	•
8698 Maidstone Court	n/a	10/22/97	50
Largo, FL 33777	Occupation		
Receipt For: X Primary Gener	HOTTOTIALIE		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	Amount of E
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this F
Elizabeth M. Sembler		11/00/07	(5)
8698 Maidstone Court	n/a	11/09/97	(50
Largo, FL 33777	Occupation		redesig
Receipt For: X Primary Gene		1 000 00	
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	Amount of 8
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this I
Elizabeth M. Sembler		11/00/07	50
8698 Maidstone Court	n/a	11/09/97	5(
Largo, FL 33777	Occupation		redesig
Receipt For: Primary X Gene	ral homemaker Aggregate Year-to-Date > \$	1,000,00	
Other (specify):		1,000,00 Date (month,	Amount of
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Melvin F. Sembler		10/00/07	1,0
10324 Paradise Blvd.	self-employed	10/22/97	1,0
Treasure Island, FL 33706	Occupation		
Receipt For: Primary X Gene	real estate developer Aggregate Year-to-Date > \$	1 000 00	
Other (specify):		1,000.00 Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Robert A. Shaheen	and amendanced	7/16/97	5
17040 Grand Bay Drive	self-employed	//10/9/	3
Boca Raton, FL 33496	Occupation		
Receipt For: Primary X Gene	eral Consultant Aggregate Year-to-Date > \$	1,000.00	
Other (specify):		Date (month,	Amount of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Richard L. Shanley	m/o	9/18/97	1
3661 Quail Ridge Drive	n/a	7/10/7/	
Boynton Beach, FL 33436	Occupation		
Receipt For: X Primary Gen	eral retired Aggregate Year-to-Date > \$	300.00	
Other (specify):		Date (month,	Amount of
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
S. M. Shepard	7/0	8/13/97	1
2510 Harbor Court	n/a		•
Ft. Myers, FL 33908	Occupation		
Receipt For: X Primary Gen	eral retired Aggregate Year-to-Date > \$	250.00	
Other (specify):	1.93.53	~~~	

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S. M. Shepard 2510 Harbor Court Ft. Myers, Ft. 33908	A. Full Name, Mailing Address and ZIF	Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Print Prin			n/a	10/27/97	100.00
Receipt For	1			- 1	
Dither (specify): Aggregate Year-to-Date S 250.00 Amount of Receipt this		mary General			
B. Full Name, Malling Address and ZIP Code A. Edwin Shinholser 3936 Trophy Blvd. New Port Richey, FL 34655 Receipt For: Frimary X General		- LI	Aggregate Year-to-Date > \$	250.00	
A. Edwin Shinholser 3936 Trophy Blvd. New Port Richey, FL 34655 Receipt For:	B. Full Name, Mailing Address and Zil	Code	Name of Employer		Amount of Each Receipt this Period
New Port Richey, FL 34655 Receipt For:	A. Edwin Shinholser				
Receipt For:	3936 Trophy Blvd.		n/a	7/14/97	200.00
C. Full Name, Mailing Address and ZIP Code Name of Employer Date (month, day, year) Aggregate Year-to-Date S Amount of Receipt this		5	Occupation		
C. Full Name, Malling Address and ZIP Code A. Edwin Shinholser 3936 Trophy Blvd. New Port Richey, FL 34655 Receipt For: Other (specify): Other (specify): Occupation retired Aggregate Year-to-Date S 600.00 Receipt this Amount of Receipt this Coupation retired Aggregate Year-to-Date S 600.00 Receipt Rec	Receipt For:	imary X General			
C. Full Name, Mailling Address and ZIP Code A. Edwin Shinholser Other (specify): X Primary General General Aggregate Year-to-Date S G00.00	Other (specify):				Amount of Each
New Port Richey, FL 34655 Occupation Primary General Aggregate Year-to-Date S G00.00	C. Full Name, Mailing Address and ZI	Code	Name of Employer		Receipt this Period
New Port Richey, FL 34655 Receipt For:	A. Edwin Shinholser			10/00/07	200.00
Receipt For: X Primary General Aggregate Year-to-Date S 600.00			n/a	10/20/97	200.00
Other (specify): D. Full Name, Mailing Address and ZIP Code Name of Employer Date (month, day, year) Receipt this	New Port Richey, FL 3465	5			
D. Full Name, Mailing Address and ZIP Code A. Edwin Shimholser 3936 Trophy Blvd. New Port Richey, FL 34655 Receipt For: Coupation Tetired Aggregate Year-to-Date Aggregate Year-to-Dat	Receipt For: X P	imary General		(00.00	
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New Port Richey, FL 34655 Cocupation retired Aggregate Year-to-Date S G00.00	į.	Code	Name of Employer		Receipt this Period
New Port Richey, FL 34655 Receipt For: Name of Employer Cocupation redired	1		and the	11/14/07	(200.0
Receipt For: X Primary General General General Aggregate Year-to-Date S G00.00				11/14/3/	redesignate
Cither (specify): Aggregate Year-to-Date S 600.00			*		Toucoigizato
E. Full Name, Malling Address and ZIP Code A. Edwin Shinholser 3936 Trophy Blvd. New Port Richey, FL 34655 Receipt For: Other (specify): F. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avernue Auburndale, MA 02166 Receipt For: Other (specify): G. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avernue Auburndale, MA 02166 Receipt For: Name of Employer Name of Employer Name of Employer Date (month, day, year) Amount of Receipt this Amount of Receipt this Tredesigned Amount of Receipt this Amount of Receipt this Amount of Employer Name of Employer Date (month, day, year) Aggregate Year-to-Date S. 250.00 Date (month, day, year) Aggregate Year-to-Date S. 250.00 Date (month, day, year) Amount of Receipt this Amount of Employer Name of Employer Name of Employer Name of Employer Aggregate Year-to-Date S. 250.00 Pate (month, day, year) Amount of Receipt this Amount of Employer Name of Employer Name of Employer Name of Employer Aggregate Year-to-Date S. 250.00 Aggregate Year-to-Date Coccupation Tetired Aggregate Year-to-Date S. 250.00 Amount of Employer Amount of Employer Name of Employer Aggregate Year-to-Date S. 250.00 Amount of Employer Aggregate Year-to-Date S. 250.00 Aggregate Yea		rimary General		600 M	
A. Edwin Shinholser 3936 Trophy Blvd. New Port Richey, FL 34655 Receipt For: Other (specify): F. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: Other (specify): G. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: Name of Employer Nam			1.99.09.00		Amount of Each
New Port Richey, FL 34655 Occupation retired Primary X General Aggregate Year-to-Date S 600.00		Code	Hame of Employee	1	Receipt this Period
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Receipt For: Primary X General retired Other (specify): Date (month, day, year) Primary Charles R. Shipley, Jr. To Vista Avenue Name of Employer Date (month, day, year) Receipt this		. .			redesignate
Aggregate Year-to-Date S 600.00 F. Full Name, Mailing Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avernue Auburndale, MA 02166 Receipt For: G. Full Name, Mailing Address and ZIP Code Occupation retired Aggregate Year-to-Date S 250.00 Other (specify): G. Full Name, Mailing Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: 71 Vista Avenue Auburndale, MA 02166 Receipt For: 72 Vista Avenue Auburndale, MA 02166 Receipt For: 73 Vista Avenue Auburndale, MA 02166 Receipt For: 74 Vista Avenue Auburndale, MA 02166 Receipt For: 75 Occupation retired Aggregate Year-to-Date S 250.00 Occupation retired Aggregate Year-to-Date S 250.00					•
F. Full Name, Mailing Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: G. Full Name, Mailing Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Augregate Year-to-Date Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: G. Full Name, Mailing Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: Mame of Employer Date (month, day, year) Amount of Employer Date (month, day, year)	11ccc.pr.1 c	nmary A General		600.00	
Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: Other (specify): G. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: Name of Employer Name of Employer Name of Employer Date (month, day, year) Receipt this Occupation Receipt this Occupation Receipt for: 1/2 1/97 Amount of Employer Name of Employer Occupation Receipt this Occupation retired Auburndale, MA 02166 Receipt For: X Primary General Accupation retired		P Code		Date (month,	Amount of Each Receipt this Period
71 Vista Avenue Auburndale, MA 02166 Receipt For: Other (specify): G. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: X Primary General Name of Employer Name	1				
Auburndale, MA 02166 Receipt For: Other (specify): G. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: X Primary General Occupation retired Name of Employer Date (month, day, year) Amount of Receipt this Occupation redes: Occupation redes: Accupation retired			n/a	7/21/97	500.0
Receipt For: Other (specify): General Aggregate Year-to-Date S 250.00 Aggregate Year-to-Date S Date (month, day, year) Amount of Employer Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: X Primary General General Accorded Year-to-Date S 250.00 Amount of Employer Date (month, day, year) Amount of Employer Occupation redes: Accorded Year-to-Date S 250.00			Occupation		
Other (specify): G. Full Name, Malling Address and ZIP Code Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: X Primary Aggregate Year-to-Date Name of Employer Date (month, day, year) Amount of Receipt this Primary General Agreed Year-to-Date S 250.00 Occupation retired Agreed Year-to-Date S 250.00		Primary General			
Charles R. Shipley, Jr. 71 Vista Avenue Auburndale, MA 02166 Receipt For: X Primary General Name of Employer day, year) Primary Occupation retired Accressive Year-de-Date S 250.00	1 ' — —		Aggregate Year-to-Date > \$		
71 Vista Avenue Auburndale, MA 02166 Receipt For: X Primary General General General Coccupation retired Coccupation Coccup	1	P Code	Name of Employer		Amount of Each Receipt this Period
Auburndale, MA 02166 Receipt For: X Primary General			n/a	9/03/97	(500.0
Receipt For: X Primary General General Appropriate S 250,000	8				redesignate
Aggregate Vegeto Date S 350 00		General General	1		
	_ ·	-nmary General		250.00	
SUBTOTAL of Receipts This Page (optional)	Other (specify):				

ITEMIZED RECEIPTS

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

PAGE 79 OF 94 FOR LINE NUMBER

Charles R. Shipley, Jr. 71 Vista Avenue		day, year)	Receipt this Perio
71 Vista Avenue			500.
	n/a	9/03/97	redesignat
Auburndale, MA 02166	Occupation		icicsigna
Receipt For: Primary X General	retired Aggregate Year-to-Date > \$	250.00	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Perry M. Shoemaker	n/a	8/04/97	100
5701 Mariner Street, Apt. 703			
Tampa, FL 33609 Receipt For: X Primary General	Occupation retired		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Robert J. Short, Jr. 3512 Berger Road	information requested	11/05/97	500
Luz, FL 33549	Occupation		
Receipt For: X Primary General	information requested		
Other (specify):	Aggregate Year-to-Date > \$	500.00	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
Peter M. Sidell	Cardiac Surg. Assoc.	11/10/97	1,580
6918 Old Whiskey Creek Drive	Occupation		
Ft. Myers, FL 33919 Receipt For X Primary General	physician		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	80.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Po
Peter M. Sidell	Cardiac Surg. Assoc.	12/25/97	(1,58
6918 Old Whiskey Creek Drive			reattrib
Ft. Myers, FL 33919	Occupation physician		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date \$	80.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Mary Kay Sidell	Mall Travel	12/25/97	89
6918 Old Whiskey Creek Drive	Occupation		reattril
Ft. Myers, FL 33919 Receipt For: X Primary General	travel agent		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of t Receipt this t
Mary Kay Sidell	Mall Travel	12/25/97	6
6918 Old Whiskey Creek Drive			reattri
Ft. Myers, FL 33919	Occupation travel agent		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date \$	1 500 00	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 80 OF 94
FOR LINE NUMBER 11ai

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Micheline Silverman			1.00
4007 Bayside Drive	The Eye Associates	11/04/97	1,00
Bradenton, FL 34210	Occupation		
Receipt For: X Primary General	C.f.O. Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
B. Full Name, Mailing Address and ZIP Code	realite of Employor	day, year)	Receipt this I
Harris Silverman, M.D. 4007 Bayside Drive	The Eye Assoc.	11/04/97	1,00
Bradenton, FL 34210			•
17/2	Occupation physician		
Receipt For: Other (specify): General	Aggregate Year-to-Date \$	1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of I Receipt this
Floyd D. Skinner		day, year)	
2211 Thomas Drive	Skinner Tax Consult.	11/04/97	1,00
Panama City, FL 32408	Occupation		
Receipt For: X Primary General	tax consultant		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
William D. Smart		11/06/07	5
3901 W. Madura Road	n/a	11/06/97	3
Gulf Breeze, FL 32561	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Malling Address and ZIP Code Chesterfield Smith	Hanc of Employer	day, year)	Receipt this
P. O. Box 015441	Holland & Knight	11/17/97	5
Miami, FL 33101	Occupation		
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Chesterfield Smith	Holland & Knight	12/29/97	(5
P. O. Box 015441			redesi
Miami, FL 33101	Occupation attorney		_55501
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
G. Fuli Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Chesterfield Smith		day, year)	Receipt this
P. O. Box 015441	Holland & Knight	12/29/97	
Miami, FL 33101	Occupation		redesi
Receipt For: Primary X General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
TOTAL of Receipts This Page (optional)			

ITEMIZED RECEIPTS

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

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11ai

A. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Layton F. Smith			•
825 Ponte Vedra Blvd.	n/a	9/25/97	50
Ponte Vedra Beach, FL 32082	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$		
Other (specify):		500.00	Amount of I
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this I
Layton F. Smith		10/17/07	(50
825 Ponte Vedra Blvd.	n/a	10/17/97	reattri
Ponte Vedra Beach, FL 32082	Occupation		(Cauri
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Hane or mikroler	day, year)	Receipt this
Joan H. Smith	n/a	10/17/97	5
825 Ponte Vedra Blvd.			reattri
Ponte Vedra Beach, FL 32082	Occupation		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Paul J. Spellman		day, year)	Receipt this
1818 Northwood Terrace	n/a	7/29/97	
Orlando, FL 32803	Occupation	- 	
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	325.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Paul J. Spellman			•
1818 Northwood Terrace	n/a	9/24/97	
Orlando, FL 32803	Occupation		
Receipt For: X Primary General	retired	205 M	
Other (specify):	Aggregate Year-to-Date > \$	325.00	Amount of
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Paul J. Spellman	-/-	10/21/97	
1818 Northwood Terrace	n/a	10/21/97	
Orlando, FL 32803	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	325.00	
Other (specify):	Name of Employer	Date (month,	Amount o
G. Full Name, Mailing Address and ZIP Code	lagine of muhioher	day, year)	Receipt this
Paul J. Spellman	n/a	11/05/97	
1818 Northwood Terrace			
Orlando, FL 32803	Occupation		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	325.00	
I I UNICI IDUCUITI:			

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 82 OF 94 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Paul J. Spellman			
1818 Northwood Terrace	n/a	12/01/97	•
Orlando, FL 32803	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	325.00	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
Stephen J. Spencer		day, year)	Receipt this
604 Palm Avenue	Spencer and Jonnatti	10/30/97	5
Belleair, FL 34616	Occupation		
Receipt For: X Primary General	architect		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Stephen J. Spencer	Spencer and Jonnatti	11/19/97	(5
604 Palm Avenue			redesi
Belleair, FL 34616 Receipt For: X Primary General	Occupation architect		
Receipt For: Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
Stephen J. Spencer 604 Palm Avenue	Spencer and Jonnatti	11/19/97	:
Belleair, FL 34616	Occupation		redesi
Receipt For: Primary X General	architect		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
A. G. Spriggs	n/a	7/25/97	
264 Saratoga Court			
Osprey, FL 34229 Receint For: Primary X General	Occupation retired		
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code Georges C. St. Laurent	Name of Employer	Date (month, day, year)	Amount of Receipt this
P. O. Box 90	Washington Mutual	11/12/97	
Longwood, FL 32750	Occupation		
Receipt For: X Primary General	banking	- FOO OO	
Other (specify):	Aggregate Year-to-Date > \$	500.00	Amount
G. Full Name, Mailing Address and ZIP Code Frances Stavros	Name of Employer	Date (month, day, year)	Receipt th
One Beach Drive, S.E., Apt. 2503	n/a	10/29/97	1
St. Petersburg, FL 33701	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	99.09	1	

ITEMIZED RECEIPTS

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

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LINE NUMBE 11ai

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) Friends of Connie Mack Amount of Each Date (month, A. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Deborah L. Steelman 1,000.00 11/10/97 self-employed 8523 Georgetown Pike McLean, VA 22102 Occupation General attorney X Primary Receipt For. Aggregate Year-to-Date 1.000.00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Edward L. Steinberg, M.Sc., O.D. 1,000.00 12/23/97 SDA Enterprises 130 Sunrise Avenue, PH 1W Palm Beach, FL 33480 Occupation vice-chairman X Primary General Receipt For: Aggregate Year-to-Date > \$ 000.00Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Vincent G. Stenger, M.D. 500.00 9/15/97 self-employed 1703 Little Pointe Circle Sarasota, FL 34231 Occupation physician X Primary General Receipt For: Aggregate Year-to-Date > \$ 625.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZiP Code Receipt this Period day, year) Virginia Stephens 250.00 9/05/97 n/a 6540 S.W. 79th Court Occupation Miami, FL 33143 retired General X Primary Receipt For: Aggregate Year-to-Date 500.00 Other (specify): Amount of Each Date (month. Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) C Douglas L. Stringer, M.D. 1,000.00 11/04/97 self-employed 2011 North Harrison Avenue 0 Panama City, FL 32405 Occupation (7 physician General X Primary Receipt For: 350.00 Aggregate Year-to-Date > \$ Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Douglas L. Stringer, M.D. (350.00)12/01/97 self-employed 2011 North Harrison Avenue redesignated Panama City, FL 32405 Occupation physician General X Primary Receipt For: Aggregate Year-to-Date > \$ 350.00 Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Douglas L. Stringer, M.D. 350.00 12/01/97 self-employed 2011 North Harrison Avenue redesignated Panama City, FL 32405 Occupation X General physician Primary Receipt For: Aggregate Year-to-Date 1.350.00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11ai

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Josephine S. Sturgis			•
2900 20th Street	n/a	10/29/97	10
Vero Beach, FL 32960	Occupation	1	
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$		
Other (specify):		250.00 Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Phillip Tasker	A 111 D. 1	0/10/07	19
2231 Gillis Court	Alliance Bank	9/19/97	1.
Maitland, FL 32751	Occupation hands officer		
Receipt For: X Primary General	bank officer Aggregate Year-to-Date > \$	570.00	
Other (specify):	Name of Employer	Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	reade of Employer	day, year)	Receipt this
Stanley G. Tate	Tate Enterprises	10/27/97	1,0
1175 N.E. 125th Street	-	_ 10,2,7,	_,,
North Miami, FL 33261	Occupation developer		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	500.00	
Other (specify): D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of
		day, year)	Receipt this
Stanley G. Tate 1175 N.E. 125th Street	Tate Enterprises	11/14/97	(1,0
North Miami, FL 33261	Occupation	-	reattr
Teller Control	developer		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
Joanne Tate		day, year)	•
1175 N.E. 125th Street, Suite 102	n/a	11/14/97	1,0
North Miami, FL 33161	Occupation	-	reattr
Receipt For: X Primary General	homemaker		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
Stewart P. Thomas			
1250 Mendavia Avenue	Thomas Mgmt. Services	7/28/97	
Coral Gables, FL 33146	Occupation		
Receipt For: X Primary General	owner	250.00	
Other (specify):	Aggregate Year-to-Date > \$	350.00	Amount o
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt thi
Stewart P. Thomas	Manage Company	0/22/07	
1250 Mendavia Avenue	Thomas Mgmt. Services	9/22/97	
Coral Gables, FL 33146	Occupation		
Receipt For: X Primary General	OWNET Aggregate Year-to-Date > \$	350.00	
Other (specify):	Addiedate Lear to pare	344	

ITEMIZED RECEIPTS

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

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ormation copied from such Heports and Statements may not be size, other than using the name and address of any political committee (in Full)			
Friends of Connie Mack			
	Name of Employee	Date (month,	Amount of Each
A. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
Virginia S. Thomas		11/04/07	500.0
2814 Canal Drive	n/a	11/04/97	500.
Panama City, FL 32405	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	500.00	
Other (specify):		500.00 Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pen
Richard K. Thorndike		10/27/07	1,000.
1000 Vicar's Landing Way, Box F-206	n/a	10/27/97	1,000.
Ponte Vedra Beach, FL 33082	Occupation		
Receipt For: X Primary General	retired	400.00	
Other (specify):	Aggregate Year-to-Date S	400.00	Amount of Eac
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
Richard K. Thorndike		11/14/07	(1,000
1000 Vicar's Landing Way, Box F-206	n/a	11/14/97	(1,000. reattribu
Ponte Vedra Beach, FL 33082	Occupation		reauriou
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date S	400.00	Amount of Eac
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Per
Mrs. Richard K. Thorndike			1 000
1000 Vicar's Landing Way, Box F-206	n/a	11/14/97	1,000
Ponte Vedra Beach, FL 33082	Occupation		reattribu
Receipt For: X Primary General	retired		
Other (specify):	Aggregate Year-to-Date > \$	1,600.00	A
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Mrs. Richard K. Thorndike			(600
1000 Vicar's Landing Way, Box F-206	n/a	12/26/97	(600)
Ponte Vedra Beach, FL 33082	Occupation		redesigna
Receipt For: X Primary General	retired	1.500.05	
Other (specify):	Aggregate Year-to-Date > \$	1,600.00	A
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Mrs. Richard K. Thorndike			<i>-</i> 00
1000 Vicar's Landing Way, Box F-206	n/a	12/26/97	600
Ponte Vedra Beach, FL 33082	Occupation		redesign
Receipt For: Primary X General	retired		
Other (specify):	Aggregate Year-to-Date S	1,600.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
John Tiedtke			
1 Isle of Sicily	self-employed	10/24/97	50
Winter Park, FL 32789	Occupation		
Receipt For: X Primary General	agriculture		
Other (specify):	Aggregate Year-to-Date > S	600.00	

ITEMIZED RECEIPTS

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

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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John Tiedtke 100.00 11/12/97 self-employed 1 Isle of Sicily Winter Park, FL 32789 Occupation agriculture General X Primary Receipt For: Aggregate Year-to-Date 600.00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) John Tiedtke (500.00)11/20/97 self-employed 1 Isle of Sicily reattributed Winter Park, FL 32789 Occupation agriculture General X Primary Aggregate Year-to-Date > \$ 600.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) S John Tiedtke (100.00)12/26/97 self-employed 1 Isle of Sicily reattributed Winter Park, FL 32789 Occupation agriculture General Receipt For: Aggregate Year-to-Date 600.00 Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Sylvia Tiedtke 500.00 11/20/97 n/a 1 Isle of Sicily reattributed Occupation Winter Park, FL 32789 housewife General X Primary Receipt For: Aggregate Year-to-Date 00.000Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Sylvia Tiedtke 100.00 12/26/97 n/a 1 Isle of Sicily reattributed Occupation Winter Park, FL 32789 housewife X Primary General Receipt For: Aggregate Year-to-Date > \$.000.000Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) David C. Tipton 250.00 11/04/97 Saltmarsky Cleaveland 2714 Country Club Drive Occupation Lynn Haven, FL 32444 C.P.A X Primary General Receipt For: Aggregate Year-to-Date 250.00 Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bruce E. Titus 500.00 Suncoast Ins. Assoc. 11/04/97 P. O. Box 22668 Occupation Tampa, FL 33622 insurance agent X Primary General Receipt For: 500.00 Aggregate Year-to-Date Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 87 | OF 94 FOR LINE NUMBER 11ai

Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
John C. Tonkin, M.D.			•
P. O. Box 48	Radiology Assoc.	12/09/97	<i>5</i> 00.0
Daytona Beach, FL 32115	Occupation		
Receipt For: X Primary General	physician Aggregate Year-to-Date > \$		
Other (specify):		500.00 Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Perio
George S. Trees		0/00/07	100.0
11954 Turtle Beach Road	n/a	8/08/97	100.0
N. Palm Beach, FL 33408	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	250.00	
Other (specify):	Name of Employer	Date (month,	Amount of Each
C. Full Name, Mailing Address and ZIP Code	radine of Employer	day, year)	Receipt this Period
George S. Trees	-/-	9/22/97	5 0.
11954 Turtle Beach Road	n/a		20.
N. Palm Beach, FL 33408	Occupation retired		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	250.00	
Other (specify): D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac
		day, year)	Receipt this Peri
Stewart Turley	n/a	11/04/97	1,000.
P. O. Box 4689			
Clearwater, FL 34618	Occupation retired		
Receipt For:	Aggregate Year-to-Date > \$	1,000.00	
Other (specify): E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac
		day, year)	Receipt this Per
Stewart Turley P. O. Box 4689	n/a	11/18/97	(1,000
Clearwater, FL 34618	Occupation		redesigna
	retired		
Receipt For: Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Eac
Stewart Turley		day, year)	Receipt this Per
P. O. Box 4689	n/a	11/18/97	1,000
Clearwater, FL 34618	Occupation		redesigna
Receipt For: Primary X General	retired		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month,	Amount of Ea Receipt this Pe
U.I.L. Partnership		day, year)	•
4229 Highway 90	n/a	10/24/97	500
Pace, FL 32571	Occupation		
Receipt For: X Primary General	partnership		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
This Page (antique)			
FOTAL of Receipts This Page (optional)	••••		

ITEMIZED RECEIPTS

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

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Friends of Connie Mack A. Full Name, Malling Address and Zil	Code		Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
Edwin A. Henry			G 77		(250.
5020 San Pedro Court			Henry Company Homes	10/24/97	me
Milton, FL 32583			Occupation		
·	rimary Ge	eneral	general contractor Aggregate Year-to-Date > \$	750.00	
Other (specify): B. Full Name, Mailing Address and Z	P Code		Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Edwin A. Henry					
5020 San Pedro Court			Henry Company Homes	11/16/97	(250
Milton, FL 32583			Occupation	7 1	redesigna
,	Primary Ge	eneral	general contractor	7770 00	
Other (specify):			Aggregate Year-to-Date \$	750.00	Amount of Ea
C. Full Name, Mailing Address and Z	IP Code		Name of Employer	Date (month, day, year)	Receipt this Pe
Edwin A. Henry				11/16/97	250
5020 San Pedro Court			Henry Company Homes	11/10/9/	redesign
Milton, FL 32583			Occupation		10000
neceipt toi.	Primary X Ge	eneral	general contractor Aggregate Year-to-Date > \$	750.00	
Other (specify):	TD Oods		Name of Employer	Date (month,	Amount of E
D. Full Name, Mailing Address and 2	IP Code		Name of Employer	day, year)	Receipt this P
Susan A. Henry 5020 San Pedro Court			Henry Company Homes	10/24/97	(25 m
Milton, FL 32583			Occupation		11.
Receipt For:	Primary G	General	bookkeeper Aggregate Year-to-Date > \$	750.00	
Other (specify):			Aggregate Four to	Date (month,	Amount of E
E. Full Name, Mailing Address and 2	IP Code		Name of Employer	day, year)	Receipt this F
Jose F. Valdivia, Jr.			Flo-Sun, Inc.	12/09/97	1,00
1121 Pine Point Road					
Singer Island, FL 33404		Concept	Occupation vice-president		
1 '	Primary G	General	Aggregate Year-to-Date > \$	1,000.00	
Other (specify): F. Full Name, Mailing Address and	ZIP Code		Name of Employer	Date (month, day, year)	Amount of B Receipt this B
E. L. Van Every					·
425 Pine Lake Drive			n/a	9/19/97	10
Naples, FL 34112			Occupation		
	Primary 0	General	retired	400.00	
Other (specify):			Aggregate Year-to-Date > \$	400.00	Amount of
G. Full Name, Mailing Address and	ZIP Code		Name of Employer	Date (month, day, year)	Receipt this
E. L. Van Every			1-	10/17/97	1
425 Pine Lake Drive			n/a	10/1//5/	•
Naples, FL 34112			Occupation		
Receipt For:	Primary	General	retired Aggregate Year-to-Date > \$	400.00	
Other (specify):			, iggregate . our to best	7000	
BTOTAL of Receipts This Page (op	tional)				1

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 89 OF 94 FOR LINE NUMBER

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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Henry G. Van der Eb 100.00 7/28/97 n/a 100 Glenview Place, #708 Naples, FL 34108 Occupation X Primary General retired Receipt For: Aggregate Year-to-Date 250.00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Richard H. Vaughan 2,000.00 11/05/97 Vaughan Assoc. 1848 Southpointe Drive Sarasota, FL 34231 Occupation owner General X Primary Receipt For: Aggregate Year-to-Date 1.000.00 Other (specify): Date (month. Amount of Each Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Richard H. Vaughan (1,000.00)12/29/97 Vaughan Assoc. 1848 Southpointe Drive redesignated Sarasota, FL 34231 Occupation owner X Primary General Receipt For: Aggregate Year-to-Date .000.000Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code day, year) Receipt this Period Richard H. Vaughan 1,000.00 12/29/97 Vaughan Assoc. 1848 Southpointe Drive redesignated Occupation Sarasota, FL 34231 owner X General Primary Receipt For: Aggregate Year-to-Date 1.000.00 Other (specify): Amount of Each Date (month. Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) R. R. Vijay, M.D. 250.00 7/17/97 self-employed 4 Columbia Drive, Suite 830 ∞ Tampa, FL 33606 Occupation physician X Primary General Receipt For: Aggregate Year-to-Date 750.00 Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) R. R. Vijay, M.D. (250.00)8/11/97 self-employed 4 Columbia Drive, Suite 830 redesignated Tampa, FL 33606 Occupation physician X Primary General Receipt For: Aggregate Year-to-Date 750.00 Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) R. R. Vijay, M.D. 250.00 8/22/97 self-employed 4 Columbia Drive, Suite 830 redesignated Tampa, FL 33606 Occupation X General Primary physician Receipt For: Aggregate Year-to-Date 750.00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

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

PAGE 90 | 94 FOR LINE NUMBER

Friends of Connie Mack	Name of Employer	Date (month,	Amount of Eac
A. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peri
R. R. Vijay, M.D.	- 16 - undered	10/10/97	1,000.
4 Columbia Drive, Suite 830	self-employed	10/10/97	1,000.
Tampa, FL 33606	Occupation		
Receipt For: X Primary General	physician Aggregate Year-to-Date > \$	750.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Hame of Employo	day, year)	Receipt this Per
R. R. Vijay, M.D.	salf amployed	11/14/97	(400
4 Columbia Drive, Suite 830	self-employed	11/14/91	redesigna
Tampa, FL 33606	Occupation		icusign
Receipt For: X Primary General	physician Aggregate Year-to-Date > \$	750.00	
Other (specify):		Date (month,	Amount of Eac
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
R. R. Vijay, M.D.		11/14/07	400
4 Columbia Drive, Suite 830	self-employed	11/14/97	redesigna
Tampa, FL 33606	Occupation		Idioigia
Receipt For: Primary X General	physician Aggregate Year-to-Date > \$	750.00	
Other (specify):	,,,gg,cgato to the	750.00 Date (month,	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pe
R. R. Vijay, M.D.		1111107	(600
4 Columbia Drive, Suite 830	self-employed	11/14/97	reattrib
Tampa, FL 33606	Occupation		16au 10
Receipt For: X Primary General	physician	750.00	
Other (specify):	Aggregate Year-to-Date > \$	750.00	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
Kathleen M. Vijayanagar		11/14/07	60
4953 Bay Way Drive	n/a	11/14/97	reattrib
Tampa, FL 33629	Occupation		1Cam IU
Receipt For: X Primary General	none		
Other (specify):	Aggregate Year-to-Date > S	600.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Charles E. Virgin, M.D.			20
3250 S. W. 3rd Avenue, #100B	self-employed	9/18/97	30
Miami, FL 33129	Occupation		
Receipt For: X Primary General	physician		
Other (specify):	Aggregate Year-to-Date > \$	300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Lynn E. Wagner			
198 Promenade Circle	Baker & Hostetler	10/24/97	50
Lake Mary, FL 32746	Occupation		
Receipt For: X Primary General	attorney		
Other (specify):	Aggregate Year-to-Date > \$	500.00	
BTOTAL of Receipts This Page (optional)	***************************************		

ITEMIZED RECEIPTS

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

PAGE 91 0F 94 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Lynn E. Wagner			(er
198 Promenade Circle	Baker & Hostetler	11/25/97	(50 redesig
Lake Mary, FL 32746	Occupation		Icucile
Receipt For: X Primary General	Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	Thanks of Employee	day, year)	Receipt this
Lynn E. Wagner	Baker & Hostetler	11/25/97	50
198 Promenade Circle			redesig
Lake Mary, FL 32746 Beceint For Primary X General	Occupation attorney		_
Receipt For: Primary X Genera Other (specify):	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of Receipt this
Harry Walia		day, year)	•
639 Cornwell on the Gulf	self-employed	11/04/97	1,0
Venice, FL 34285	Occupation		
Receipt For: X Primary Genera			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Harry Walia			/2
639 Cornwell on the Gulf	self-employed	12/01/97	(5 redesig
Venice, FL 34285	Occupation		icucij
Receipt For: X Primary Genera	Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
E. Full Name, Mailing Address and ZIP Code	Maine of Employer	day, year)	Receipt this
Harry Walia	self-employed	12/01/97	4
639 Cornwell on the Gulf			redesi
Venice, FL 34285 Receipt For: Primary X General	Occupation		•
Receipt For: Primary X General Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Daniel L. Walker		day, year)	
328 Carl Avenue	Provident Merchandise	10/31/97	;
Belleair, FL 33756	Occupation		
Receipt For: X Primary Gener			
Other (specify):	Aggregate Year-to-Date > \$	500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt thi
Jeffrey S. Walker, M.D.			1,
1281 5th Avenue, N., #408	self-employed	10/30/97	ı ,
St. Petersburg, FL 33705	Occupation		
Receipt For: X Primary Gene	al physician Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Aggregate real-to-bate		

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 92 OF 94 FOR LINE NUMBER

Friends of Connie Mack A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
A. Gary Walsingham			•
14520 Front Beach Road	Alvin's Stores, Inc.	7/25/97	1,500.
Panama City Beach, FL 32413	Occupation		
Receipt For: X Primary General	owner		
Other (specify):	Aggregate Year-to-Date \$	1,500.00	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Peri
A. Gary Walsingham		011010	(1,000
14520 Front Beach Road	Alvin's Stores, Inc.	8/12/97	(1,000.
Panama City Beach, FL 32413	Occupation		redesigna
Receipt For: X Primary General		1 500 00	
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	Amount of Eac
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Per
A. Gary Walsingham	_		1 000
14520 Front Beach Road	Alvin's Stores, Inc.	8/12/97	1,000
Panama City Beach, FL 32413	Occupation		redesigna
Receipt For: Primary X General	owner	1.500.00	
Other (specify):	Aggregate Year-to-Date > \$	1,500.00	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
Mrs. Charles E. Weeder		10,100,105	0.50
P. O. Box 1606	n/a	12/23/97	850
Bartow, FL 33830	Occupation		
Receipt For: X Primary Genera			
Other (specify):	Aggregate Year-to-Date > \$	1,350.00	Amount of En
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Preston A. Wells, Jr.			1 000
P. O. Box 1720	n/a	10/08/97	1,000
Ft. Lauderdale, FL 33302	Occupation		
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	0.00	Amount of Co
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
Edward C. White			50
1541 Foxhall Road, N.W.	Alpine Group	12/23/97	50
Washington, D.C. 20007	Occupation		
Receipt For: X Primary Gener		700.00	
Other (specify):	Aggregate Year-to-Date > \$	500.00	A
G. Full Name, Mailing Address and ZiP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this P
William R. Williams			·
861 Laurel Drive	n/a	7/15/97	10
Lake Park, FL 33403	Occupation		
Receipt For: X Primary Gener			-
Other (specify):	Aggregate Year-to-Date > \$	450.00	
UBTOTAL of Receipts This Page (optional)			.]

ITEMIZED RECEIPTS

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William R. Williams		10/06/07	100.00
861 Laurel Drive	n/a	10/06/97	100.00
Lake Park, FL 33403	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	450.00	
Other (specify):		450.00 Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Period
William R. Williams		10/17/07	(50.0
861 Laurel Drive	n/a	10/17/97	redesignate
Lake Park, FL 33403	Occupation		Igneriging
Receipt For: X Primary General	retired	450.00	
Other (specify):	Aggregate Year-to-Date > \$	450.00	Amount of Each
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Period
William R. Williams		10/15/05	50.0
861 Laurel Drive	n/a	10/17/97	50.0
Lake Park, FL 33403	Occupation		redesignate
Receipt For: Primary X General	retired	150.00	
Other (specify):	Aggregate Year-to-Date > \$	450.00	A
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perio
Annette Wilson			250 (
1601 S.E. Avenue K Place	information requested	12/12/97	250.0
Belle Glade, FL 33430	Occupation		
Receipt For: X Primary General	information requested		
Other (specify):	Aggregate Year-to-Date > \$	250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Calvin Winter			
6220 S.W. 123rd Terrace	n/a	9/15/97	500.
Miami, FL 33156	Occupation		
Receipt For: X Primary General			
Other (specify):	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Gregory H. Wolf			
581 Sunset Road	Humana, Inc.	10/30/97	1,000
Louisville, KY 40206	Occupation		
	- hief own officer		
	Aggregate Year-to-Date > \$	1,000.00	
THEOCEPT TO THE CONTRACT OF TH		Date (month,	Amount of Eac Receipt this Per
Other (specify): G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	
Other (specify): G. Full Name, Mailing Address and ZIP Code Daniel P. Worth			150
Other (specify): G. Full Name, Mailing Address and ZIP Code Daniel P. Worth 2496 Windwood Lane	n/a	7/2A/97	150
Other (specify): G. Full Name, Mailing Address and ZIP Code Daniel P. Worth 2496 Windwood Lane	n/a Occupation		150
Other (specify): G. Full Name, Mailing Address and ZIP Code Daniel P. Worth	n/a Occupation retired	7/24/97	150
Other (specify): G. Full Name, Mailing Address and ZIP Code Daniel P. Worth 2496 Windwood Lane Orange Park, FL 32073	n/a Occupation		150
Other (specify): G. Full Name, Mailing Address and ZIP Code Daniel P. Worth 2496 Windwood Lane Orange Park, FL 32073 Receipt For: X Primary General	n/a Occupation retired Aggregate Year-to-Date > \$	7/24/97	150

ITEMIZED RECEIPTS

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

ME OF COMMITTEE (in Full)	ittee to solicit contributions from such c		
Friends of Connie Mack			
	Name of Employer	Date (month,	Amount of Each
A. Full Name, Mailing Address and ZIP Code	Name of Employor	day, year)	Receipt this Period
Daniel P. Worth	7/2	9/29/97	35.0
2496 Windwood Lane	n/a		
Orange Park, FL 32073	Occupation		
Receipt For: X Primary General	retired Aggregate Year-to-Date > \$	342.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Hame of Employer	day, year)	Receipt this Peri
Daniel P. Worth	n/a	10/24/97	57.
2496 Windwood Lane	IVa		
Orange Park, FL 32073	Occupation retired		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	342.00	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
C. Full Name, Mailing Address and ZIP Code	Hame of Employer	day, year)	Receipt this Per
Patricia B. Wright	n/a	11/24/97	150.
336 Bob White Way			
Sarasota, FL 34236	Occupation		
Receipt For: Primary X General	Aggregate Year-to-Date > \$	400.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
D. Full Name, Mailing Address and ZIP Code	realite of Employee	day, year)	Receipt this Pe
Robert F. Zales, II	self-employed	11/04/97	300
P. O. Box 4335			
Panama City, FL 32401	Occupation charter/comm fishing		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	300.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Hame of Employer	day, year)	Receipt this Pe
Kathleen von Raits	n/a	9/22/97	50
1000 Vicars Landing Way, #A-204			
Ponte Vedra Beach, FL 32082	Occupation housewife		
Receipt For: X Primary General	Aggregate Year-to-Date > \$	250.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
F. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Po
	Occupation		
Receipt For: Primary General		l	
Other (specify):	Aggregate Year-to-Date > \$	Date (month,	Amount of E
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
	Occupation		
Receipt For: Primary General	 		
Other (specify):	Aggregate Year-to-Date > \$		ļ

ITEMIZED RECEIPTS

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

PAGE 1 12
FOR LINE NUMBER 11c

. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E
		day, year)	Receipt this I
ADM PAC	n/a	11/06/97	1,00
P. O. Box 1470			-,-
Decatur, IL 62525	Occupation		
receipt For:	n/a Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
3. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this
Aflac, Inc. PAC	-/-	9/22/97	1,0
Aflac Center	n/a		1,0
Columbus, GA 31999	Occupation		
Receipt For: X Primary General	n/a Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Haine of Employer	day, year)	Receipt this
Alliant Techsystems Fund		10/30/97	1,0
600 2nd Street, N.E.	n/a	10/30/7/	1,0
Hopkins, MN 55343	Occupation		
Receipt For: X Primary General	n/a Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
American Sugar Cane League PAC		10/21/07	1,0
P. O. Drawer 938	n/a	10/31/97	1,0
Thibodaux, LA 70302	Occupation		
Receipt For: X Primary General	n/a	2 000 00	
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	Amount o
E. Full Name, Mailing Address and ZiP Code	Name of Employer	Date (month, day, year)	Receipt this
American Sugar Cane League PAC		10/21/07	1,0
P. O. Drawer 938	n/a	10/31/97	1,
Thibodaux, LA 70302	Occupation		
Receipt For: X Primary General	n/a	2 222 22	
Other (specify):	Aggregate Year-to-Date > \$	2,000.00	A
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt thi
American Ambulance Assoc. PAC			•
1301 Connecticut Avenue, N.W.	n/a	10/27/97	1,
Washington, D.C. 20036	Occupation		
Receipt For: X Primary General	n/a		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
American Sugarbeet Growers PAC			1
1156 15th Street, N.W., Suite 1020	n/a	9/17/97	2,
Washington, D.C. 20005	Occupation		
Receipt For: X Primary General	n/a		
Other (specify):	Aggregate Year-to-Date > \$	2,000,00	

ITEMIZED RECEIPTS

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

PAGE 2 | 12

FOR LINE NUMBER 11c

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or fo	
Any information copied from such neptries and states of any political committee to solicit contributions from such committee.	

purposes, other than using the name and address of any po-NAME OF COMMITTEE (in Full) Friends of Connie Mack Amount of Each Date (month, A. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) American Crystal Sugar PAC 1,000.00 9/29/97 n/a 101 N. Third Street Occupation Moorhead, MN 56560 X Primary General n/a Receipt For: Aggregate Year-to-Date 000.00Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) American Occupupational Therapy PAC 1,000.00 12/03/97 n/a P. O. Box 31220 Occupation Bethesda, MD 20824 n/a General X Primary Receipt For: Aggregate Year-to-Date 000,000 Other (specify): Amount of Each Date (month. Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) American Airlines PAC 1.000.00 11/17/97 n/a 1101 17th Street, N.W. Occupation Washington, D.C. 20036 n/a General X Primary Receipt For: Aggregate Year-to-Date .000.000 Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) American Hotel Motel PAC 1,000.00 11/17/97 1201 New York Ave., N.W., 6th Floor n/a Occupation Washington, D.C. 20005 n/a General Receipt For: X Primary Aggregate Year-to-Date .000.00 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Amgen PAC 1,000.00 11/05/97 n/a 1300 Eye Street, N.W., Suite 270W Washington, D.C. 20005 Occupation General X Primary Receipt For: 000.000 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bayer PAC 1,000.00 12/09/97 n/a Bayer Road Pittsburgh, PA 15205 Occupation n/a General X Primary Receipt For: .000.000 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Penod day, year) Baypac 1,000.00 10/14/97 n/a P. O. Box 271082 Occupation Tampa, FL 33688 X Primary General n/a Receipt For: Aggregate Year-to-Date 1.500.00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)......

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 3 | 12 FOR LINE NUMBER

Bell Atlantic Corp. PAC 1710 Rhode Island Avenue, N.W. Washington, D.C. 20036 Receipt For: Other (specify): B. Full Name, Mailing Address and ZIP Code CSR America PAC 945 E. Paces Ferry Rd., #2110 Atlanta, GA 30326 Receipt For: Other (specify): C. Full Name, Mailing Address and ZIP Code Care Pac 1310 G Street, N.W., 12th Floor Washington, D.C. 20005 Receipt For: Other (specify): D. Full Name, Mailing Address and ZIP Code Champion Inatl Corp. PAC 1875 Eye Street, N.W., Suite 540 Washington, D.C. 20006 Receipt For: Other (specify): E. Full Name, Mailing Address and ZIP Code Chevy Chase Bank PAC 8401 Connecticut Avenue Chevy Chase, MID 20815 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Chevy Chase, MID 20815 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Chicky Chase, MID 20815 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Citicorp Voluntary Political Fund 1101 Pennsylvania Avenue, N.W. Washington, D.C. 20004 Receipt For: X Primary General Occupance occupance Chevy Chase, MID 20815 Receipt For: X Primary General Difference occupance Chevy Chase, MID 20815 Receipt For: X Primary General Difference occupance Chevy Chase, MID 20815 Receipt For: X Primary General Difference occupance Chevy Chase, MID 20815 Receipt For: X Primary General Difference occupance Chevy Chase, MID 20815 Receipt For: X Primary General Difference occupance Chevy Chase, MID 20815 Receipt For: X Primary General Difference occupance Chevy Chase, MID 20815	ation gate Year-to-Date sof Employer ation gate Year-to-Date sof Employer pation gate Year-to-Date sof Employer continuation togate Year-to-Date sof Employer continuation togate Year-to-Date sof Employer	Date (month, day, year) 10/30/97 1000.00 Date (month, day, year) 10/30/97 1,000.00 Date (month, day, year) 1,100.00 Date (month, day, year) 11/10/97 1,000.00 Date (month, day, year) 1,000.00 Date (month, day, year) 1,000.00 Date (month, day, year) 9/15/97	Amount of Each Receipt this Period 1,000.0
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Receipt For: Other (specify): F. Full Name, Malling Address and ZIP Code Citicorp Voluntary Political Fund 1101 Pennsylvania Avenue, N.W. Washington, D.C. 20004 Receipt For: X Primary General II General II General II General II General II General III		9113131	5,000
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Other (specify): F. Full Name, Malling Address and ZIP Code Citicorp Voluntary Political Fund 1101 Pennsylvania Avenue, N.W. Washington, D.C. 20004 Receipt For: X Primary General Aggu Name Name Name Name Name Name Name Name			
Citicorp Voluntary Political Fund 1101 Pennsylvania Avenue, N.W. Washington, D.C. 20004 Receipt For: X Primary General	egate Year-to-Date > \$	5.000.00	
Citicorp Voluntary Political Fund 1101 Pennsylvania Avenue, N.W. Washington, D.C. 20004 Receipt For: X Primary General IL	e of Employer	Date (month,	Amount of Eac Receipt this Per
1101 Pennsylvania Avenue, N.W. Washington, D.C. 20004 Receipt For: X Primary General III		day, year)	
Washington, D.C. 20004 Occurrence	a	10/27/97	1,000
Receipt For: X Primary General 10	pation		
Other (specify): Agg	egate Year-to-Date > \$	1.000.00	
	e of Employer	Date (month,	Amount of Ea Receipt this Pe
Credit Union Leg. Action Council		day, year)	Heceipt tills re
805 15th Street, N.W., Suite 300	a	11/04/97	3,000
605 15th 5thcct, 11. W., 5th 505	pation		
Receipt For: X Primary General 1			
	egate Year-to-Date > \$	3.500.00	
BTOTAL of Receipts This Page (optional)			

ITEMIZED RECEIPTS

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

PAGE OF 12 FOR LINE NUMBER

	nds of Connie Mack		Name of Employer	Date (month,	Amount of Each
Cred	Name, Mailing Address and ZIP Code iit Union Leg. Action Council			day, year)	Receipt this Period
	15th Street, N.W., Suite 300 hington, D.C. 20005		11/a Occupation	— II/16/9/	(200.0
Receipt		General	n/a		
neceipi	Other (specify):	_	Aggregate Year-to-Date > \$	3.500.00	
B. Full	Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Perior
	lit Union Leg. Action Council 15th Street, N.W., Suite 300		n/a	11/18/97	500.0
Was	hington, D.C. 20005		Occupation n/a		
Receip	··· <u>··</u>	X General	Aggregate Year-to-Date > \$	3.500.00	
	Other (specify):			Date (month,	Amount of Each
	Name, Mailing Address and ZIP Code		Name of Employer	day, year)	Receipt this Perio
100	well & Moring PAC 1 Pennsylvania Avenue, N.W.		11/a	10/27/97	500.0
Was	chington, D.C. 20004		Occupation		
Receip	For: X Primary	General	11/2 Aggregate Year-to-Date > \$	500.00	
<u> </u>	Other (specify):		Name of Employer	Date (month,	Amount of Each
1	Name, Mailing Address and ZIP Code		Name of Employer	day, year)	Receipt this Perio
	oitte & Touche PAC 1 Pennsylvania Ave., N.W., #3501	N	n/a	10/10/97	1,000.
Was	shington, D.C. 20004		Occupation		
Receip	ot For: X Primary	General	n/a	1 000 00	
	Other (specify):		Aggregate Year-to-Date > \$	1,000.00	Amount of Eacl
I	Name, Mailing Address and ZIP Code kstein Shapiro & Morin PAC		Name of Employer	Date (month, day, year)	Receipt this Peri
120	1 L Street, N.W.		n/a	10/27/97	1,000.
Wa	shington, D.C. 20037	_	Occupation		
Recei	ot For: X Primary	General	n/a	1 000 00	
	Other (specify):		Aggregate Year-to-Date > \$	1,000.00	Amount of Eac
	Name, Malling Address and ZIP Code Lilly & Company PAC		Name of Employer	Date (month, day, year)	Receipt this Pen
Lill	y Corporate Center		n/a	10/27/97	1,000
	ianapolis, IN 46285		Occupation		
Recei	pt For: X Primary	General	n/a Aggregate Year-to-Date > \$	1,000.00	
	Other (specify):		Name of Employer	Date (month,	Amount of Eac
	II Name, Malling Address and ZIP Code IST & Young PAC			day, year)	Receipt this Per
	•		n/a	10/24/97	1,000
	25 Connecticut Avenue, N.W.		Occupation		
	ashington, D.C. 20036	General	n/a		
Rece	pt For: X Primary		Aggregate Year-to-Date > \$	1.000.00	
i	Other (specify):				

ITEMIZED RECEIPTS

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

PAGE 5 OF 12
FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Federation of Amer. Health Systems		Guy, year,	•
1111 19th Street, N.W., Suite 402	n/a	11/17/97	1,0
Washington, D.C. 20036	Occupation		
Receipt For: X Primary General	n/a		
Other (specify):	Aggregate Year-to-Date \$	1,000.00	Amount of
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Fla. Power & Light PAC		10.100.100	<i>c</i> (
P. O. Box 14000	n/a	12/23/97	5,0
Juno Beach, FL 33408	Occupation		
Receipt For: X Primary General	n/a Aggregate Year-to-Date > \$	5 000 00	
Other (specify):	7.99.09	5,000,00 Date (month,	Amount of
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Florida Health PAC	7/0	11/24/97	1,0
P. O. Box 6936	n/a	11124191	1,0
Jacksonville, FL 32236	Occupation n/a		
Receipt For: X Primary General Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
Furniture PAC		day, year)	Receipt this
Box 1003	n/a	12/01/97	1,0
High Point, NC 27261	Occupation		,
Receipt For: X Primary General	n/a		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount o
General Electric Co. PAC		day, year)	Deceibi fui
1299 Pennsylvania Avenue, NW, #1100	n/a	10/27/97	1,
Washington, D.C. 20004	Occupation		
Receipt For: X Primary General	n/a		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o
Glaxo, Inc. Democracy Fund			•
Five Moore Drive	n/a	11/17/97	1,
Research Triangle Park NC 27709	Occupation		
Receipt For: X Primary General	n/a	1,000,00	
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	4 • •
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt th
Greenburg, Traurig PAC	1 ,	10/20/07	1
1221 Brickell Avenue	n/a	10/29/97	1,
Miami, FL 33131	Occupation		
Receipt For: X Primary General	n/a Aggregate Year-to-Date > \$	2,000,00	
Other (specify):	Aggregate real-to-bate 3	- Annot	

ITEMIZED RECEIPTS

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

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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code day, year) Receipt this Period Health Insurance PAC 1.000.00 9/22/97 555 13th Street, N.W., Suite 606E n/a Washington, D.C. 20004 Occupation General n/a Receipt For: Aggregate Year-to-Date 000.00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Health Plan PAC 1,000.00 10/21/97 n/a 1129 20th Street, N.W., #600 Washington, D.C. 20036 Occupation General X Primary Receipt For: Aggregate Year-to-Date .000.000 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Healthcare Compare PAC 1.000.00 10/14/97 n/a 3200 S. Highland Avenue Downers Grove, IL 60515 Occupation General n/a X Primary Receipt For: Aggregate Year-to-Date .000.000 Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Hoffman LaRoche Committee 1,000.00 10/06/97 1300 I Street, N.W., Suite 520W n/a Washington, D.C. 20005 Occupation n/a X General Receipt For: Primary Aggregate Year-to-Date .000.000 Other (specify): Amount of Each Date (month. Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Holland & Knight Comm. for Eff. Govt. 1,000.00 10/27/97 n/a 2100 Pennsylvania Ave., NW, #400 CO Washington, D.C. 30037 Occupation X Primary Receipt For: Aggregate Year-to-Date 2.000.00 Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Holland & Knight Comm. for Eff. Govt. 1,000.00 10/28/97 2100 Pennsylvania Ave., NW, #400 n/a Washington, D.C. 30037 Occupation X Primary n/a General Receipt For: Aggregate Year-to-Date 20000Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Independent Bankers PAC 1,000.00 10/27/97 n/a One Thomas Circle, N.W., Suite 950 Occupation Washington, D.C. 20005 X Primary n/a General Receipt For: Aggregate Year-to-Date Other (specify): SUBTOTAL of Receipts This Page (optional)

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

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

B. Full Name, Mailing Address and ZIP Code JM Family Enterprises PAC 190 N. W. 12th Avenue Deerfield Beach, FL 33442 Receight For: Other (specify): C. Full Name, Mailing Address and ZIP Code Mane of Employer Name of Employer Name of Employer 1/2 12/03/97 5,00 Cocupation 1/2 Aggregate Year-to-Date \$ 5,000.00 Date (month, day, year) Aggregate Year-to-Date \$ 1,000.00 Amount of Enceipt For: Name of Employer N	A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Eac Receipt this Per
1401 H Street, N.W. 1/2 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 11/05/97 1,100 1,10	Investment Mgmt. PAC		14 10 - 10 -	1 000
Receipt For	1401 H Street, N.W.	n/a	11/05/97	1,000
Citer (specify): Aggregate Year-to-Date S 1,000.00	Washington, D.C. 20005	Occupation		
Second Companies Second Comp	· <u>—</u>	n/a Angregate Year-to-Date S	1 000 00	
B. Full Name, Mailing Address and ZIP Code In/a				Amount of Ea
190 N.W. 12th Avenue Detrifield Beach, FL 33442 Occupation 11/2 Aggregate Year-to-Date S 5,000.00		Table of Employ	day, year)	Receipt this Pe
Decrifield Reach, FL 33442 Occupation n/a Aggregate Year-to-Date S S,000.00		7/0	12/03/97	5,000
Receipt For:			1203/5/	2,000
Aggregate Year-to-Date S S,000,00	Conord	- '		
Name of Employer Date (month, day, year) Cocupation Date (month, day, year)	Receipt For:		5,000.00	
Lockheed Employees PAC 4500 Park Granada Blvd. Calabasas, CA 91399		Name of Employer	Date (month,	Amount of Ea
A500 Park Granada Blvd. Calabasas, CA 91399			day, year)	neceipt tills i e
Calabasas, CA 91399 Cocupation In/a Co		n/a	11/17/97	1,000
Receipt For: X Primary General Aggregate Year-to-Date S 1,000.00		Occupation		
Cother (specify): Aggregate Year-to-Date \$ 1,000.00 D. Full Name, Mailling Address and ZIP Code Name of Employer Date (month, day, year) MBNA Corp. Federal PAC 400 Christiana Road Newark, DE 19713 Receipt For:	Conomi	n/a		
D. Full Name, Malling Address and ZIP Code MBNA Corp. Federal PAC 400 Christiana Road Newark, DE 19713 Receipt For: Cother (specify): X Primary General		Aggregate Year-to-Date > \$		
A00 Christiana Road Newark, DE 19713 Occupation In/a Occupation In/a Aggregate Year-to-Date S 2,000.00	D. Full Name, Mailing Address and ZIP Code	Name of Employer		Amount of Ea Receipt this Pe
A00 Christiana Road Newark, DE 19713 Occupation n/a Occupation n/a Aggregate Year-to-Date S 2,000.00	MBNA Corp. Federal PAC			4.00
Receipt For: X Primary General II/a		n/a	10/27/97	2,00
Comparison Com	Newark, DE 19713			
E. Full Name, Malling Address and ZIP Code Magellan Health Service Comm. 3414 Peachtree Rd., NE, Suite 1400 Atlanta, GA 30326 Receipt For: Other (specify): F. Full Name, Malling Address and ZIP Code Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: Other (specify): General Occupation n/a 10/27/97 Aggregate Year-to-Date Name of Employer Name of Employer Name of Employer Name of Employer Date (month, day, year) Amount of Receipt this Name of Employer Date (month, day, year) Aggregate Year-to-Date S 2,000.00 Date (month, day, year) Amount of Receipt this Amount of Receipt this Name of Employer Date (month, day, year) Name of Employer Date (month, day, year) Receipt this 10/27/97 1,0 Amount of Receipt this	Receipt For: X Primary General		200000	
Receipt this Springfield, MA 01111 Receipt For: X Primary General General Springfield, MA 01111 Receipt For: X Primary General General Other (specify): X Primary General Occupation In/a				Amount of E
Atlanta, GA 30326 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: City Primary General Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: City Primary General Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: City Primary General Mass Mutual PAC 10/27/97 2,C Aggregate Year-to-Date S 2,000.00 Name of Employer Date (month, day, year) Aggregate Year-to-Date S 2,000.00 Amount of Receipt this Mass Mutual PAC 10/27/97 10/27/97 1,C Amount of Receipt this Receipt For: I Primary General Mass Mutual PAC 10/27/97 10/27/97 10/24/97 1,C Amount of Receipt this Receipt For: Name of Employer Date (month, day, year) Amount of Receipt this Receipt For: Name of Employer Date (month, day, year) Date (month, day, year) Amount of Receipt this Receipt For: Name of Employer Date (month, day, year) Date (month, day, year) Amount of Receipt this Receipt For: Name of Employer Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Date (month, day, year) Receipt For: Name of Employer Date (month, day, year) Date (month, day, year) Date (month, day, year) Amount of Receipt For: Name of Employer Date (month, day, year) Date (mont		мате от Етрюует		Receipt this P
Atlanta, GA 30326 Receipt For: Other (specify): F. Full Name, Mailing Address and ZIP Code Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: Other (specify): General Occupation I/a 10/27/97 2,C Springfield, MA 01111 Receipt For: Other (specify): G. Full Name, Mailing Address and ZIP Code Merck PAC 601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: I/a Name of Employer Name of Empl		7/0	11/05/97	1,00
Receipt For: X Primary General N/a				-,
Aggregate Year-to-Date S 1,000,00				
F. Full Name, Mailing Address and ZIP Code Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: Other (specify): General Merck PAC 601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: X Primary General Occupation 1/a Amount of Receipt this 10/27/97 2,0 Occupation 1/a Aggregate Year-to-Date > \$ 2,000.00 Name of Employer Date (month, day, year) Amount of Receipt this Amount of Receipt this Amount of Receipt this 1/a 10/14/97 1,6 Occupation 1/a Occupation 1/a Occupation 1/a 10/14/97 1,6 Occupation 1/a			1.000.00	
Mass Mutual PAC 1295 State Street Springfield, MA 01111 Receipt For: Occupation In/a Aggregate Year-to-Date Springfield, Mass Mutual PAC Springfield, MA 01111 Receipt For: Name, Malling Address and ZIP Code Merck PAC 601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: X Primary General Occupation In/a			Date (month,	Amount of E
1295 State Street Springfield, MA 01111 Occupation In/a Occupation O			day, year)	
Springfield, MA 01111 Receipt For: Occupation In/a Aggregate Year-to-Date S 2,000.00 Amount of Employer Merck PAC 601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: X Primary General Occupation Name of Employer Date (month, day, year) Amount of Receipt this 1/2 1/4/97 1,6 Occupation In/a Appropriate Year-to-Date A		n/a	10/27/97	2,00
Receipt For: X Primary General 11/a				
Other (specify): G. Full Name, Malling Address and ZIP Code Merck PAC 601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: Aggregate Year-to-Date Name of Employer Date (month, day, year) Amount of Receipt this 10/14/97 1,50 Occupation n/a Anount of Employer Date (month, day, year) Anount of Receipt this Amount of Employer Date (month, day, year) 10/14/97 1,50 Anount of Employer Anount of Employer Date (month, day, year) Anount of Employer Name of Employer Date (month, day, year) 10/14/97 1,50 Anount of Employer Anount of Employer Date (month, day, year) Anount of Employer 10/14/97 1,50 Anount of Employer 10/14/97 1,50 Anount of Employer Anount of Employer Anount of Employer 10/14/97 1,50 Anount of Employer 10/14/97				
Merck PAC 601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: Name of Employer day, year) Receipt this		Aggregate Year-to-Date > \$	2,000.00	
601 Pennsylvania Ave., NW, #1200 Washington, D.C. 20004 Receipt For: Na		Name of Employer		Amount of E Receipt this I
Washington, D.C. 20004 Receipt For: X Primary General General Acceptate S 1,000,000			10/14/07	1 0
Receipt For: X Primary General n/a			10/14/9/	1,00
Appropriate Vegr-to-Date > \$ 1,000,000				
Other (specify):		n/a Angregate Year-to-Date > \$	1,000,00	
	Other (specify):			

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 8 OF 12 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Minn-Dak Farmers Coop PAC			•
Box 0	n/a	11/17/97	1,00
Wahpeton, ND 58075	Occupation		
Receipt For: X Primary Gene	eral n/a Aggregate Year-to-Date > \$	1,000,00	
Other (specify):	Name of Employer	Date (month,	Amount of I
B. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this
NRA Political Victory Committee 1600 Rhode Island Avenue, N.W.	n/a	10/27/97	1,0
Washington, D.C. 20036	Occupation		
Receipt For: X Primary Gene			
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	A
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Natl. Assoc. of Federal Credit Unions PAC		10.007/07	1,0
P. O. Box 3769	n/a	10/27/97	1,0
Washington, D.C. 20007	Occupation		
Receipt For: X Primary Gene	eral 11/2 Aggregate Year-to-Date > S	1.000,00	
Other (specify): D. Full Name, Malling Address and ZIP Code	Name of Employer	Date (month,	Amount of
Natl. Society of Accountants PAC		day, year)	Receipt this
1010 N. Fairfax Street	n/a	11/05/97	5
Alexandria, VA 22314	Occupation		
	neral n/a		
Other (specify):	Aggregate Year-to-Date > \$	500.00	Amount of
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this
Natl. Venture Capital PAC	-/-	10/24/97	2,0
1050 17th Street, N.W.	n/a	10/24/9/	2,
Washington, D.C. 20036	Occupation neral 11/2		
Receipt For: X Primary Ger Other (specify):	Aggregate Year-to-Date > \$	2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o
New York Life PAC	,		1,0
51 Madison Avenue	n/a	10/17/97	1,
New York, NY 10010	Occupation		
Heceipt For:	neral n/a Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount o
G. Full Name, Mailing Address and ZIP Code Owens-Corning Employees PAC		day, year)	Receipt thi
Fiberglas Tower	n/a	12/03/97	1,
Toledo, OH 43659	Occupation		
	eneral n/a		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
STOTAL of Receipts This Page (optional)		>	

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 9 OF 12 FOR LINE NUMBER

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
Penney PAC			
P. O. Box 227481	n/a	11/17/97	1,0
Dallas, TX 75272	Occupation		
Receipt For: X Primary Gene	ral n/a Aggregate Year-to-Date > \$	1.000.00	
Other (specify):	Name of Employer	Date (month,	Amount of
B. Full Name, Mailing Address and ZIP Code	ttains of Employer	day, year)	Receipt this
Pfizer PAC	n/a	10/31/97	1,0
235 E. 42nd Street New York, NY 10017	Occupation		•
W = 1 Cook			
Receipt For: Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
PhRMA Better Govt. Committee			
1100 15th Street, N.W.	n/a	10/27/97	1,0
Washington, D.C. 20005	Occupation		
Receipt For: X Primary Gene	eral 11/2 Aggregate Year-to-Date > \$	1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount o
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this
Pharmacia & Upjohn PAC	n/a	11/24/97	1,0
7000 Portage Road Kalamazoo, MI 49001	Occupation		
Receipt For: X Primary Gen	Aggregate Year-to-Date > \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount o Receipt this
Phoenix Home Life PAC			•
1 American Row	n/a	9/22/97	
Hartford, CT 06115	Occupation		
Receipt For: X Primary Gen	eral 11/2 Aggregate Year-to-Date > \$	500.00	
Other (specify):	Name of Employer	Date (month,	Amount o
F. Full Name, Mailing Address and ZIP Code	Haine of Employer	day, year)	Receipt thi
Power PAC-Florida Power P. O. Box 14042	n/a	12/12/97	1,
St. Petersburg, FL 33733	Occupation		
	neral n/a		
Other (specify):	Aggregate Year-to-Date > \$	1,000.00	
G. Fuli Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt th
Price Waterhouse PAC 1801 K Street, N.W., 7th Floor	n/a	11/24/97	1
Washington, D.C. 20006	Occupation		
	neral n/a		
Other (specify):	Aggregate Year-to-Date > \$	1.000.00	
TOTAL of Receipts This Page (optional)			

ITEMIZED RECEIPTS

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

10 FOR LINE NUMBER

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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) Friends of Connie Mack Date (month, Amount of Each Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Raytheon PAC 1,000.00 10/28/97 n/a 141 Spring Street Occupation Lexington, MA 02173 X General n/a Receipt For: Aggregate Year-to-Date 1,000,00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Realtors PAC 1,000.00 11/06/97 n/a 430 North Michigan Avenue Chicago, IL 60611 Occupation General X Primary Receipt For: Aggregate Year-to-Date .000.00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Retail PAC 1,000.00 10/31/97 n/a 325 7th Street, N.W., #1000 Occupation Washington, D.C. 20004 X General n/a Primary Receipt For: Aggregate Year-to-Date 1 000.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Schering-Plough Government Fund 5,000.00 12/03/97 n/a 1 Giralda Farms Occupation Madison, NJ 07940 n/a X Primary General Receipt For: 5.000.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Shaw Pittman Potts PAC 2,500.00 9/15/97 n/a 2300 N Street, N.W. Washington, D.C. 20037 Occupation n/a X Primary Receipt For: 5.000.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Shaw Pittman Potts PAC 2,500.00 12/09/97 n/a 2300 N Street, N.W. Washington, D.C. 20037 Occupation n/a General X Primary Receipt For: Aggregate Year-to-Date 5,000,00 Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Smith Barney Better Govt. Committee 1,000.00 10/24/97 n/a 388 Greenwich Street Occupation New York, NY 10013 General n/a X Primary Receipt For: Aggregate Year-to-Date m mOther (specify):

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

ITEMIZED RECEIPTS

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

PAGE 11 OF 12

FOR LINE NUMBER

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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) SmithKlein Beecham PAC 1.000.00 9/29/97 n/a P. O. Box 7929 Philadelphia, PA 19101 Occupation X Primary General n/a Receipt For: Aggregate Year-to-Date 1 000 00 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) So. Minn. Sugar Co-op PAC 1,000.00 11/10/97 n/a P. O. Box 500 Renville, MN 56284 Occupation n/a General X Primary Receipt For: Aggregate Year-to-Date 000 00 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Society of Thoracic Surgeons PAC 5.000.00 10/27/97 n/a 1200 19th Street, N.W., Suite 300 Washington, D.C. 20036 Occupation General n/a X Primary Receipt For: Aggregate Year-to-Date 5.000.00 Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Sun Trust Bankpac 1,000.00 10/30/97 n/a 150 South Monroe Street, Suite 200 Occupation Tallahassee, FL 32301 n/a X Primary General Receipt For: Aggregate Year-to-Date .500.00 Other (specify): Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) C. Teco Energy PAC 2,000.00 10/27/97 n/a P. O. Box 111 3 Tampa, FL 33601 Occupation 9 X Primary General Receipt For: 2.000.00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month. Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Tracor PAC 1,000.00 10/27/97 n/a 1215 Jefferson Davis Hwy., #1109 Arlington, VA 22202 Occupation n/a General X Primary Receipt For: 1 000 00 Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Travelers PAC 1,000.00 12/01/97 n/a One Tower Square Occupation Hartford, CT 06183 n/a X Primary General Receipt For: Aggregate Year-to-Date 1 000.00 Other (specify): SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only).....

ITEMIZED RECEIPTS

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

PAGE 12 OF 12 FOR LINE NUMBER

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Peri
Tupperware PAC			•
14901 S. Orange Blossom Trail	n/a	7/02/97	1,000
Orlando, FL 32837	Occupation		
Receipt For: X Primary Gen		\$ 1,000,00	
Other (specify):	Aggregate Year-to-Date	\$ 1,000.00 Date (month,	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
U.S. Sugar Corp. ESOP PAC		10/31/97	500
P. O. Box 1207	n/a	10/31/9/	500
Clewiston, FL 33440	Occupation		
Receipt For:	neral 11/2 Aggregate Year-to-Date	\$ 1,500.00	
Other (specify):	Name of Employer	Date (month,	Amount of Ea
C. Full Name, Mailing Address and ZIP Code		day, year)	Receipt this Per
U.S. Sugar Corp. ESOP PAC P. O. Box 1207	n/a	12/09/97	1,000
Clewiston, FL 33440	Occupation		
	neral n/a		
Receipt For: X Primary Ger		\$ 1,500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea Receipt this Pe
U.S. Surgical Corp. PAC		day, year,	•
150 Glover Avenue	n/a	11/10/97	1,000
Norwalk, CT 06856	Occupation		
	neral n/a		
Other (specify):	Aggregate Year-to-Date	> s 1,000.00	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this Pe
Walter Industries PAC	,	11/04/97	1,00
1500 N. Dale Mabry	n/a	11/04/97	1,00
Tampa, FL 33631	Occupation		
Heceipt For:	neral n/a Aggregate Year-to-Date	> \$ 1,000.00	
Other (specify):	Name of Employer	Date (month,	Amount of E
F. Full Name, Mailing Address and ZIP Code	Haine of Employer	day, year)	Receipt this P
Williams & Jensen PAC 1155 21st Street, N.W.	n/a	11/10/97	1,00
Washington, D.C. 20036			
	Occupation neneral 11/a		
Receipt For: X Primary G	Aggregate Year-to-Date	> \$ 1,000,00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month,	Amount of E Receipt this P
G. I till Hallie, manning received and an acceptance		day, year)	neceipt uns r
	Occupation		
Receipt For: Primary G	eneral		1
Other (specify):	Aggregate Year-to-Date	> \$	
JBTOTAL of Receipts This Page (optional)			

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ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the	PAGE OF 1 1
Detailed Summary Page	FOR LINE NUMBER
	14

E OF COMMITTEE (in Full)			
Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Ea
U. S. Treasury	n/a-income tax refund	11/03/97	895
Washington, D.C.	Occupation		0).
Receipt For: Primary General	n/a Aggregate Year-to-Date > \$	25 420 12	
Other (specify): B. Full Name, Mailing Address and ZIP Code	Name of Employer	25,439.12 Date (month,	Amount of Ea
D. Fun Maine, Maining Address and En Cour		day, year)	Receipt this Pe
Receipt For: Primary General	Occupation		
Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this P
Receipt For: Primary General	Occupation		
Other (specify):	Aggregate Year-to-Date > \$		Amount of E
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Receipt this P
Receipt For: Primary General	Occupation		
Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of E Receipt this F
Receipt For: Primary General	Occupation		
Other (specify):	Aggregate Year-to-Date > S		
F. Fuli Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	
	Occupation		
Receipt For: Primary General Other (specify):	Aggregate Year-to-Date > \$	1	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Receipt this
			ı
Receipt For: Primary General	Occupation		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Aggregate Year-to-Date > \$		

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) PAGE for each category of the FOR LINE NUMBER Detailed Summary Page

Amount of Each

Receipt this Period

3,856.52

Date (month,

day, year)

12/31/97

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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bank of Tampa 2,764.90 7/31/97 n/a-interest P. O. Box 1 Tampa, FL 33601 Occupation General n/a Primary Receipt For: Aggregate Year-to-Date 33,488,15 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bank of Tampa 2,695.13 8/29/97 n/a-interest P. O. Box 1 Tampa, FL 33601 Occupation n/a General Primary Receipt For: Aggregate Year-to-Date > \$ 33,488,15 Other (specify): Amount of Each Date (month, Name of Employer C. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bank of Tampa 2,935.10 9/30/97 n/a-interest P. O. Box 1 Tampa, FL 33601 Occupation n/a 1.0 Primary Receipt For: Aggregate Year-to-Date 33,488,15 Other (specify): Amount of Each Date (month, Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bank of Tampa 2,855.28 10/31/97 n/a-interest P. O. Box 1 Tampa, FL 33601 Occupation n/a General Primary Receipt For: 33,488,15 Aggregate Year-to-Date Other (specify): $C^{,}$ Amount of Each Date (month, Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Bank of Tampa 3.099.53 11/28/97 n/a-interest P. O. Box 1 30 Tampa, FL 33601 Occupation n/a General Primary Receipt For: 33,488.15 Aggregate Year-to-Date

lampa, FL 33001	Occupation	1	
Receipt For:	neral 11/2 Aggregate Year-to-Date > \$	33,488.15	
Other (specify): G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrill Lynch One Tampa City Center	n/a-interest	7/25/97	201.44
Tampa, FL 33602	Occupation		
Receipt For:	eneral n/a Aggregate Year-to-Date > \$	2,414.54	
Other (specify):			
BTOTAL of Receipts This Page (optional)			

Name of Employer

n/a-interest

FE5AN059

Other (specify):

Bank of Tampa

P. O. Box 1

F. Full Name, Mailing Address and ZIP Code

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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

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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
Any information copied from such reports and classifications are called contributions from such committee.
Any information copied from such Reports and Claterinans may purposes, other than using the name and address of any political committee to solicit contributions from such committee.
pulposso, care, man, care,
NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrill Lynch		0/20/07	252
One Tampa City Center	n/a-interest	8/29/97	253.
Tampa, FL 33602	Occupation		
Receipt For: Primary General	n/a Aggregate Year-to-Date > \$	2,414.54	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
B. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Peri
Merrill Lynch	u la internat	9/26/97	202.
One Tampa City Center	n/a-interest		202.
Tampa, FL 33602	Occupation n/a		
Receipt For: Primary General	Aggregate Year-to-Date > \$	2,414.54	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
C. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
Merrill Lynch	-/a interest	10/31/97	254
One Tampa City Center	n/a-interest	10/31/9/	۵.
Tampa, FL 33602	Occupation		
Receipt For: Primary General	I II/2 Aggregate Year-to-Date > \$	2.414.54	
Other (specify):	Name of Employer	Date (month,	Amount of Eac
D. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Per
Merrill Lynch	n/a-interest	11/19/97	138
One Tampa City Center		11/15/5/	
Tampa, FL 33602	Occupation	1	
Receipt For: Primary General	al n/a Aggregate Year-to-Date > \$	2,414.54	
Other (specify):	1.99.03-0	Date (month,	Amount of Ea
E. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pe
Merrill Lynch	n/a-interest	11/28/97	81
One Tampa City Center	iva-interest		
Tampa, FL 33602	Occupation		
Receipt For: Primary General	al n/a Aggregate Year-to-Date > \$	2,414.54	
Other (specify):		Date (month,	Amount of Ea
F. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this Pe
Merrill Lynch	n/o interest	12/31/97	30
One Tampa City Center	n/a-interest		50.
Tampa, FL 33602	Occupation		
Receipt For: Primary Gener	n/a Aggregate Year-to-Date > \$	2,414.54	
Other (specify):		Date (month,	Amount of Ea
G. Full Name, Mailing Address and ZIP Code	Name of Employer	day, year)	Receipt this P
U. S. Treasury	n/a-interest	11/03/97	4
			·
Washington, DC	Occupation		
Receipt For: Primary Gene	ral 11/2 Aggregate Year-to-Date > \$	25,439,12	1
Other (specify):	Aggregate Teat-to-Date	23.437.12	
BTOTAL of Receipts This Page (optional)		>	
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SCHEDULE A

ITEMIZED RECEIPTS

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

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) Friends of Connie Mack Amount of Each Date (month, Name of Employer A. Fuli Name, Mailing Address and ZIP Code Receipt this Period day, year) U.S. Treasury 12.250.00 11/19/97 n/a-interest Washington, DC Occupation General n/a Primary Receipt For: Aggregate Year-to-Date 439.12 Other (specify): Amount of Each Date (month, Name of Employer B. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Occupation Primary Receipt For: Aggregate Year-to-Date Other (specify): Amount of Each Date (month, C. Full Name, Mailing Address and ZIP Code Name of Employer Receipt this Period day, year) Occupation General Receipt For: Aggregate Year-to-Date Other (specify): Date (month, Amount of Each Name of Employer D. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Occupation General Receipt For: Primary Aggregate Year-to-Date Other (specify): Amount of Each Date (month. Name of Employer E. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) C: က Occupation 6 General Primary Receipt For: Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer F. Full Name, Mailing Address and ZIP Code Receipt this Period day, year) Occupation Primary General Receipt For: Aggregate Year-to-Date Other (specify): Amount of Each Date (month, Name of Employer G. Full Name, Mailing Address and ZiP Code Receipt this Period day, year) Occupation Primary Receipt For: Aggregate Year-to-Date Other (specify): SUBTOTAL of Receipts This Page (optional) 31,933.56

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

ITEMIZED DISBURSEMENTS

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

PAGE OF 1 18

FOR LINE NUMBER

iends of Connie Mack			
L. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of E Disbursement Th
Judy W. Wilson	salary	# 104 10F	(2)
2685 Cypress Bend Drive	Disbursement for: Primary General	7/01/97	63
Clearwater, FL 33761	Other (specify)	Data (maath	Amount of E
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Disbursement TI
Bank of Tampa	payroll taxes	7/01/07	10
P. O. Box 1	Disbursement for: Primary General	7/01/97	19
Tampa, FL 33601	Other (specify)	5-1-11	
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of I Disbursement Ti
Arthur J. Finklestein & Assoc.	political consulting	= 104 10E	
16 N. Astor	Disbursement for: Primary General	7/01/97	6,65
Irving, NY 10533	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbutsement	Date (month, day, year)	Amount of Disbursement T
Mitch B. Bainwol	reception expense	m 100 100	1.04
8400 Cross Lake Drive	Disbursement for: Primary Genera	7/02/97	1,35
Fairfax Station, FL 22039	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Disbursement T
Portik Illustration & Design	reception expense		
P. O. Box 1282	Disbursement for: Primary Genera	7/02/97	34
Washington, D.C. 20013	Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Disbursement 1
A T & T	telephone expense		
P. O. Box 105501	Disbursement for: Primary Genera	7/03/97	
Atlanta, GA 30348	Other (specify)		
G. Full Name, Mailing Address and ZiP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Disbursement
GTE	telephone expense		
610 Morgan St.	Disbursement for: Primary Gener	7/03/97	2
Tampa, FL 33602	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Disbursement
K & K Enterprises, Inc.	postage		1
P. O. Box 4000	Disbursement for: Primary Gener	7/03/97	2,2
Lynchburg, FL 24502	Other (specify)		
1. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount o Disbursement
Office Depot	office supplies		Disbursemon
P. O. Box 182378	Disbursement for: Primary Gener	7/03/97	
Columbus, OH 43218	Other (specify)		

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ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF 18
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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 contributions or for commercial contributions and address of any political committee to solicit contributions from such committee.	
the same and address of any political committee to solicit contributions from Such Committee.	

NAME OF COMMITTEE (in Full) Friends of Connie Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes	office equipment	#100 IOT	016.60
P. O. Box 22126	Disbursement for: Primary General	7/03/97	216.68
Tampa, FL 33622	Other (specify)	5.46	
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
W. James Wilson	travel		00.15
2685 Cypress Bend Drive	Disbursement for: Primary General	7/03/97	29.15
Clearwater, FL 33761	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zephyrhills Water Co.	office expense		00.57
3919 Highland Avenue	Disbursement for: Primary General	7/03/97	33.57
Tampa, FL 33603	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Watkins & Co., PA	acctng. & mgmt. services		
610 S. Boulevard	Disbursement for: Primary General	7/14/97	4,674.61
Tampa, FL 33606	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	salary	day, your,	
2685 Cypress Bend Drive	Disbursement for: Primary General	7/16/97	635.40
Clearwater, FL 33761	Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Bank of Tampa	payroll taxes	day, year)	
P. O. Box 1	Disbursement for: Primary General	7/16/97	192.68
Tampa, FL 33601	Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Perio
Judy W. Wilson	salary	day, year)	
2685 Cypress Bend Drive	Disbursement for: Primary Genera	7/22/97	635.40
Clearwater, FL 33761	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Bank of Tampa	payroll taxes	day, year)	Disbursement This Perio
P. O. Box 1		7/22/97	192.68
Tampa, FL 33601	Disbursement for: Primary General Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	travel	day, year)	Disbursement This Perio
2685 Cypress Bend Drive		7/22/97	142.34
Clearwater, FL 33761	Disbursement for: Primary General Other (specify)	11	
Cical Water, T.D. 33701	Office (Sheoris)		
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BTOTAL of DisbursementsThis Page (optional)			
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ITEMIZED DISBURSEMENTS

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Any mistration of any political committee to solicit contributions from such committee.
purposes, other than using the name and address or any pointed committee or
Any information copied from such Reports and Statements may not be sold of asset of

NAME OF COMMITTEE (in Full) Eriends of Connie Mack

riends of Connie Mack	Dumage of Dishuseament	Date (month,	Amount of Each
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	day, year)	Crisbursement This Period
U. S. Postmaster	postage	7/22/97	500.00
	Disbursement for: Primary General	1122191	500.00
Tampa, FL 33601	Other (specify)	Date (month,	Amount of Each
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	day, year)	Disbursement This Period
Federal Express	delivery expense	5/00/07	13.26
P. O. Box 1140, Dept. A	Disbursement for: Primary General	7/22/97	15.20
Memphis, TN 38101	Other (specify)		Amount of Each
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Disbursement This Period
U. S. Senate Restaurant	meeting expense	# 100 /07	500.00
First and C Streets, N.E.	Disbursement for: Primary General	7/29/97	500.00
Washington, DC 20510	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Senate Restaurant	reception expense		604.50
First and C Streets, N.E.	Disbursement for: Primary General	7/29/97	604.50
Washington, DC 20510	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T	telephone expense		1
P. O. Box 105501	Disbursement for: Primary Genera	8/07/97	25.40
Atlanta, GA 30348	Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
	office rent	day, year)	
Austin Development Co. P. O. Box 22197	Disbursement for Primary General	8/07/97	646.49
	Disbursement for: Primary General Other (specify)	"	
Tampa, FL 33622	Purpose of Disbursement	Date (month,	Amount of Each
G. Full Name, Mailing Address and ZIP Code	parking	day, year)	Disbursement This Period
Austin Development Co.		8/07/97	27.82
P. O. Box 22197	Disbursement for: Primary General	ai	
Tampa, FL 33622	Other (specify) Purpose of Disbursement	Date (month,	Amount of Each
H. Full Name, Mailing Address and ZIP Code	telephone expense	day, year)	Disbursement This Period
GTE		8/07/97	190.43
610 Morgan St.	Disbursement for: Primary Gener	at	
Tampa, FL 33602	Other (specify)	Date (month,	Amount of Each
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement political consulting	day, year)	Disbursement This Period
Arthur J. Finklestein & Assoc.	ponnear consuming	8/07/97	7,229.39
16 N. Astor	Disbursement for: Primary Gener	ral	
Irving, NY 10533	Other (specify)		
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ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

		-	
Friends	of	Connie	Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Lukens Company	direct mail services		
2800 Shirlington Road	Disbursement for: Primary General	8/07/97	4,026.69
Arlington, VA 22206	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zephyrhills Water Co.	office expense		
3919 Highland Avenue	Disbursement for: Primary General	8/07/97	20.97
Tampa, FL 33603	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
W. James Wilson	travel		
2685 Cypress Bend Drive	Disbursement for: Primary General	8/07/97	21.68
Clearwater, FL 33761	Other (specify)		<u> </u>
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	telephone expense		
2685 Cypress Bend Drive	Disbursement for: Primary General	8/07/97	30.72
Clearwater, FL 33761	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Robert Watkins & Co., PA	acctng. & mgmt. services	day, year)	
610 S. Boulevard	Disbursement for: Primary General	8/12/97	5,486.52
Tampa, FL 33606	Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Mitch B. Bainwol	travel	day, year)	Disbursement This Perior
8400 Cross Lake Drive	Disbursement for: Primary General	8/12/97	1,104.08
Fairfax Station, FL 22039	Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	salary	day, year)	Disbursement This Perio
2685 Cypress Bend Drive		8/15/97	635.40
Clearwater, FL 33761	Disbursement for: Primary Genera Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Bank of Tampa	payroll taxes	day, year)	Disbursement This Perio
P. O. Box 1		8/15/97	192.68
Tampa, FL 33601	Disbursement for: Primary General Other (specify)		
-	Purpose of Disbursement	Date (month,	Amount of Each
1. Full Name, Mailing Address and ZIP Code Lansdowne Resort	meeting expense	day, year)	Disbursement This Perio
44050 Woodridge Pkwy.		8/19/97	823.44
Leesburg, VA 20176	Disbursement for: Primary General	"	
Licioung, vii zorio	Other (specify)		
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ITEMIZED DISBURSEMENTS

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RE OF COMMITTEE (in Full) Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Southwest Publishing	postage		
2600 N.W. Topeka Blvd.	Disbursement for: Primary General	8/25/97	1,106.46
Topeka, KS 66617	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	salary		
2685 Cypress Bend Drive	Disbursement for: Primary General	8/28/97	635.40
Clearwater, FL 33761	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of Tampa	payroll taxes		
P. O. Box 1	Disbursement for: Primary General	8/28/97	192.68
Tampa, FL 33601	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Austin Development Co.	office rent	day, year)	
P. O. Box 22197	Disbursement for: Primary General	8/28/97	646.49
Tampa, FL 33622	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Austin Development Co.	parking	day, year)	Disbursement This Period
P. O. Box 22197	Disbursement for: Primary General	8/28/97	27.82
Tampa, FL 33622	Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
AT&T	telephone expense	day, year)	Disbursement This Period
P. O. Box 105501		8/28/97	50.68
Atlanta, GA 30348	Disbursement for: Primary Genera Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Federal Express	delivery expense	day, year)	Disbursement This Period
P. O. Box 1140, Dept. A		8/28/97	14.28
Memphis, TN 38101	Disbursement for: Primary General Other (specify)	1	
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
The Lukens Company	direct mail services	day, year)	Disbursement This Period
2800 Shirlington Road		8/28/97	83.57
Arlington, VA 22206	Disbursement for: Primary General Other (specify)	"	
1. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Arthur J. Finklestein & Assoc.	political consulting	day, year)	Disbursement This Period
16 N. Astor		8/29/97	6,000.00
Irving, NY 10533	Disbursement for: Primary Genera	4	
11 10000	Other (specify)		
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ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full) Friends of Connie Mack Amount of Each Date (month, Purpose of Disbursement A. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) telephone expense **GTE** 231.70 9/04/97 Disbursement for: Primary Genera 610 Morgan St. Tampa, FL 33602 Other (specify) Amount of Each Date (month, Purpose of Disbursement B. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) reception expense W. James Wilson 336.04 9/04/97 2685 Cypress Bend Drive Disbursement for: Primary General Clearwater, FL 33761 Other (specify) Date (month, Amount of Each Purpose of Disbursement C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) office expense Zephyrhills Water Co. 20.97 9/04/97 3919 Highland Avenue Disbursement for: Primary Tampa, FL 33603 Other (specify) Amount of Each Date (month, Purpose of Disbursement D. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) acctng. & mgmt. services Robert Watkins & Co., PA 2.812.29 9/10/97 Disbursement for: | Primary | General 610 S. Boulevard Other (specify) Tampa, FL 33606 Amount of Each Date (month, Purpose of Disbursement E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) travel Judy W. Wilson 132.33 9/11/97 2685 Cypress Bend Drive Disbursement for: Primary General Clearwater, FL 33761 Other (specify) Amount of Each Date (month, Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period salary Judy W. Wilson 635.40 9/16/97 2685 Cypress Bend Drive Disbursement for: Primary Clearwater, FL 33761 Other (specify) Amount of Each Purpose of Disbursement Date (month, G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) payroll taxes Bank of Tampa 192.68 9/16/97 P. O. Box 1 Disbursement for: Primary General Tampa, FL 33601 Other (specify) Purpose of Disbursement Date (month, Amount of Each H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) delivery expense Federal Express 75.00 9/18/97 P. O. Box 1140, Dept. A Disbursement for: Primary General Memphis, TN 38101 Other (specify) Amount of Each Date (month, Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period direct mail services The Lukens Company 9/18/97 3,116.17 2800 Shirlington Road Disbursement for: Primary General Arlington, VA 22206 SUBTOTAL of DisbursementsThis Page (optional)

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NAME OF COMMITTEE (in Full)

Friends of Connie Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	reception expense		212.05
2685 Cypress Bend Drive	Disbursement for: Primary General	9/18/97	312.05
Clearwater, FL 33761	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Senator Connie Mack	travel		<i>(5</i> 1.00
517 Hart Senate Off. Bldg.	Disbursement for: Primary General	9/22/97	651.00
Washington, DC 20510	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Senator Connie Mack	travel		
517 Hart Senate Off. Bldg.	Disbursement for: Primary General	9/22/97	606.00
Washington, DC 20510	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
U. S. Senator Connie Mack	travel	day, year)	
		9/22/97	348.00
517 Hart Senate Off. Bldg.	Disbursement for: Primary General Other (specify)	1	
Washington, DC 20510	Purpose of Disbursement	Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code	travel	day, year)	Disbursement This Period
U. S. Senator Connie Mack		9/22/97	348.00
517 Hart Senate Off. Bldg.	Disbursement for: Primary Genera	11	
Washington, DC 20510	Other (specify)	Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	day, year)	Disbursement This Period
U. S. Senator Connie Mack	travel	9/22/97	143.21
517 Hart Senate Off. Bldg.	Disbursement for: Primary General	al 9122171	
Washington, DC 20510	Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Senator Connie Mack	travel	0/00/07	1,099.00
517 Hart Senate Off. Bldg.	Disbursement for: Primary Gener	9/22/97	1,055.00
Washington, DC 20510	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Perio
U. S. Senator Connie Mack	travel		
517 Hart Senate Off. Bldg.	Disbursement for: Primary Gene	9/22/97	294.00
Washington, DC 20510	Other (specify)		
	Purpose of Disbursement	Date (month,	Amount of Each
I. Full Name, Mailing Address and ZIP Code	reception expense	day, year)	Disbursement This Perio
Scott Barnhart		9/23/97	194.46
517 Hart Senate Office Bldg.	Disbursement for: Primary Gene	ral	
Washington, D.C. 20510	Other (specify)		
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NAME OF COMMITTEE (in Full)

Friends of Comme Wack			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	travel		
2685 Cypress Bend Drive	Disbursement for: Primary General	9/23/97	127.10
Clearwater, FL 33761	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Austin Development Co.	office rent		
P. O. Box 22197	Disbursement for: Primary General	9/25/97	644.97
Tampa, FL 33622	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Austin Development Co.	parking	day, year)	
P. O. Box 22197	Disbursement for: Primary General	9/25/97	27.76
Tampa, FL 33622	Other (specify)		<u> </u>
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
	printing	day, year)	Disbursement This Period
Kwik Kopy		9/25/97	3,207.49
4920 W. Cypress	Disbursement for: Primary General Other (specify)		1
Tampa, FL 33607	Other (specify) Purpose of Disbursement	Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code	office supplies	day, year)	Disbursement This Period
Office Depot		9/25/97	130.66
P. O. Box 182378	Disbursement for: Primary General	1	
Columbus, OH 43218	Other (specify)	Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Disbursement This Period
U. S. Postmaster	postage	9/26/97	1,800.00
	Disbursement for: Primary General	1 20171	1,000.00
Tampa, FL 33601	Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Florida Dept. of Revenue	income taxes		
5050 W. Tennessee Street	Disbursement for: Primary General	9/29/97	1,410.00
Tallahassee, FL 32399	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Perior
Direct Mail Productions	postage		
340 Scarlett Road	Disbursement for: Primary Genera	9/29/97	876.18
Oldsmar, FL 34677	Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	salary	day, year)	Disbursement This Perio
2685 Cypress Bend Drive		10/01/97	635.40
Clearwater, FL 33761	Disbursement for: Primary Genera	21	
CRAINARY, III 33101	Other (specify)		
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NAME OF COMMITTEE (in Full) Friends of Connie Mack Amount of Each Purpose of Disbursement Date (month, A. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) payroll taxes Bank of Tampa 192.68 10/01/97 Disbursement for: Primary General P. O. Box 1 Other (specify) Tampa, FL 33601 Purpose of Disbursement Date (month, Amount of Each B. Full Name, Mailing Address and ZIP Code Dishursement This Period day, year) telephone expense AT&T 10/02/97 94.56 P. O. Box 105501 Disbursement for: Primary General Other (specify) Atlanta, GA 30348 Purpose of Disbursement Amount of Each Date (month, C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) printing Rinaldi Printing Co. 1,465.90 10/02/97 4514 Adamo Drive Disbursement for: Primary General Tampa, FL 33605 Other (specify) Amount of Each Date (month, Purpose of Disbursement D. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) postage U.S. Postmaster 10/02/97 500.00 General Disbursement for: Primary Tampa, FL 33601 Other (specify) Amount of Each Date (month, Purpose of Disbursement E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) office expense Zephyrhills Water Co. 20.97 10/02/97 3919 Highland Avenue Disbursement for: Primary General Tampa, FL 33603 Other (specify) Amount of Each Date (month. Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) Arthur J. Finklestein & Assoc. political consulting 10/06/97 6,000.00 16 N. Astor Disbursement for: Primary General Irving, NY 10533 Other (specify) Amount of Each Purpose of Disbursement Date (month, G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) payroll taxes Bank of Tampa 105.00 10/10/97 P. O. Box 1 Disbursement for: Primary General Tampa, FL 33601 Other (specify) Date (month, Amount of Each Purpose of Disbursement H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) direct mail services **Direct Mail Productions** 10/10/97 369.03 340 Scarlett Road Disbursement for: Primary General Oldsmar, FL 34677 Other (specify) Date (month, Amount of Each Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) delivery expense Federal Express 153.00 10/10/97 P. O. Box 1140, Dept. A Disbursement for: Primary General Memphis, TN 38101 Other (specify) SUBTOTAL of DisbursementsThis Page (optional) TOTAL This Period (last page this line number only)

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) Friends of Connie Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GTE	telephone expense	10/10/07	208.89
610 Morgan St.	Disbursement for: Primary General	10/10/97	200.09
Tampa, FL 33602	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pitney Bowes	equipment expense		
P. O. Box 22126	Disbursement for: Primary General	10/10/97	226.18
Tampa, FL 33622	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster	postage		
	Disbursement for: Primary General	10/10/97	500.00
Tampa, FL 33601	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	travel		
2685 Cypress Bend Drive	Disbursement for: Primary General	10/10/97	127.56
Clearwater, FL 33761	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Judy W. Wilson	salary	day, year)	
2685 Cypress Bend Drive	Disbursement for: Primary General	10/16/97	635.40
Clearwater, FL 33761	Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Bank of Tampa	payroll taxes	day, year)	Disbursement This Period
P. O. Box 1	Disbursement for: Primary General	10/16/97	192.68
Tampa, FL 33601	Other (specify)		:
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	telephone expense	day, year)	Disbursement This Period
2685 Cypress Bend Drive		10/16/97	33.93
Clearwater, FL 33761	Disbursement for: Primary General Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Robert Watkins & Co., PA	acctng. & mgmt. services	day, year)	Disbursement This Period
610 S. Boulevard		10/16/97	2,564.75
Tampa, FL 33606	Disbursement for: Primary Genera	u l	
	Other (specify) Purpose of Disbursement	Date (month,	Amount of Each
I. Full Name, Mailing Address and ZIP Code	reception expense	day, year)	Disbursement This Period
Red Hot & Blue		10/23/97	1,094.69
1600 Wilson Blvd.	Disbursement for: Primary Genera	1	
Arlington, VA 22209	Other (specify)	 	
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information copied from such neports and Statements that loses, other than using the name and address of any political	al committee to solicit contributions from s	uch committee.	
AME OF COMMITTEE (in Full)			
Friends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Perior
W. James Wilson	travel		
2685 Cypress Bend Drive	Disbursement for: Primary	General 10/27/97	459.24
Clearwater, FL 33761	Other (specify)	<u> </u>	
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Perio
Scott Barnhart	reception expense	oay, your,	
517 Hart Senate Office Bldg.	Disbursement for: Primary	General 10/27/97	120.00
Washington, D.C. 20510	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Gateway 2000	travel	day, year)	Disbursement This Perio
707 D Street, N.W.	Disbursement for: Primary	General 10/30/97	1,104.40
Washington, D.C. 20004	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
AT&T	telephone expense	day, year)	Disbursement This Perio
P. O. Box 105501		General 10/30/97	114.13
Atlanta, GA 30348	Disbursement for: Primary Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Austin Development Co.	office rent	day, year)	Disbursement This Period
P. O. Box 22197		General 10/30/97	644.97
Tampa, FL 33622	Disbursement for: Primary Cother (specify)	Generar	
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Austin Development Co.	parking	day, year)	Disbursement This Per
P. O. Box 22197		10/30/97	27.16
1	Disbursement for: Primary Other (specify)	General	
Tampa, FL 33622	Purpose of Disbursement	Date (month,	Amount of Each
G. Full Name, Mailing Address and ZIP Code	reception expense	day, year)	Disbursement This Per
B-Hive Award Center		10/30/97	703.53
1810 N. Hercules Avenue	Disbursement for: Primary	General	
Clearwater, FL 34825	Other (specify) Purpose of Disbursement	Date (month,	Amount of Each
H. Full Name, Mailing Address and ZIP Code	direct mail services	day, year)	Disbursement This Pe
Direct Mail Productions	CHICAL HEAT SELVICES	10/30/97	369.03
340 Scarlett Road	Disbursement for: Primary	General	
Oldsmar, FL 34677	Other (specify)	Date (month,	Amount of Each
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement direct mail services	day, year)	Disbursement This Pe
The Lukens Company	unea man services	10/30/97	5,560.03
2800 Shirlington Road	Disbursement for: Primary	General	3,500.00
Arlington, VA 22206	Other (specify)		
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ITEMIZED DISBURSEMENTS

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Duiposes. Onlet man using the name and address.	

NAME OF COMMITTEE (in Full) Friends of Connie Mack Amount of Each Purpose of Disbursement Date (month, A. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) office supplies Office Depot 19.18 10/30/97 P. O. Box 182378 Disbursement for: Primary General Other (specify) Columbus, OH 43218 Purpose of Disbursement Amount of Each Date (month, B. Full Name, Mailing Address and ZIP Code Disbursement This Period postage U.S. Postmaster 1,000.00 10/30/97 Disbursement for: Primary General Tampa, FL 33601 Other (specify) Amount of Each Purpose of Disbursement Date (month, C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) salary Judy W. Wilson 635.40 10/30/97 2685 Cypress Bend Drive General Disbursement for: Primary Other (specify) Clearwater, FL 33761 Amount of Each Date (month, Purpose of Disbursement D. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period office expense Zephyrhills Water Co. 3.40 10/30/97 3919 Highland Avenue Disbursement for: Primary Other (specify) Tampa, FL 33603 Amount of Each Date (month. Purpose of Disbursement E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) payroll taxes Bank of Tampa 192.68 10/30/97 P. O. Box 1 Disbursement for: Primary General Other (specify) Tampa, FL 33601 Amount of Each Date (month, Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code day, year) travel Alamo Jet, Inc. 10/31/97 1,709.28 2665 Oak Ridge Court Disbursement for: Primary General Ft. Myers, FL 33901 Other (specify) Amount of Each Purpose of Disbursement Date (month, G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) travel Natl Republican Cong Committee 900.00 10/31/97 320 First St., S.E. Disbursement for: Primary General Washington, DC 20003 Other (specify) Purpose of Disbursement Date (month, Amount of Each H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) political consulting Arthur J. Finklestein & Assoc. 6,788.85 11/03/97 16 N. Astor Disbursement for: Primary General Irving, NY 10533 Other (specify) Amount of Each Date (month, Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period travel U. S. Senator Connie Mack 42.78 11/03/97 517 Hart Senate Off. Bldg. Disbursement for: Primary General

Other (specify)

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Washington, DC 20510

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Friends of Connie Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GTE	telephone expense	11/06/07	222.85
610 Morgan St.	Disbursement for: Primary General	11/06/97	222.83
Tampa, FL 33602	Other (specify)	Data (marth	A
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U. S. Postmaster	post office box rental	11/06/07	104.00
	Disbursement for: Primary General	11/06/97	104.00
Tampa, FL 33601	Other (specify)	Dota /	B maying at Phase.
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	travel	11/06/97	198.83
2685 Cypress Bend Drive	Disbursement for: Primary General	11/00/9/	170.03
Clearwater, FL 33761	Other (specify)	Data (man-ti-	Amount of Each
D. Fuli Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barnett Bank of Florida	travel	11/06/97	2,176.00
P. O. Box 40789	Disbursement for: Primary General	ולוטטונג	2,170.00
Jacksonville, FL 32203	Other (specify)	Date (A I A Proc to
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
W. James Wilson	travel	11/10/97	150.89
2685 Cypress Bend Drive	Disbursement for: Primary General	11/10/7/	150.05
Clearwater, FL 33761	Other (specify)	B-1- ("	
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	reception expense	11/10/97	956.26
2685 Cypress Bend Drive	Disbursement for: Primary General	11/10/7/	930.20
Clearwater, FL 33761	Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Scott Barnhart	reception expense	11/13/97	663.77
517 Hart Senate Office Bldg.	Disbursement for: Primary General	11113171	003.77
Washington, D.C. 20510	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rinaldi Printing Co.	printing	11/13/97	1,238.30
4514 Adamo Drive	Disbursement for: Primary General	ולוכוווו	1,230.30
Tampa, FL 33605	Other (specify)	<u> </u>	
1. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy W. Wilson	salary	11/14/97	635.40
2685 Cypress Bend Drive	Disbursement for: Primary General	11/14/7/	0.5.40
Clearwater, FL 33761	Other (specify)		1
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e of committee (in Full) riends of Connie Mack			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of Tampa	payroll taxes		
P. O. Box 1	Disbursement for: Primary General	11/14/97	192.68
Tampa, FL 33601	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express	delivery expense		
P. O. Box 1140, Dept. A	Disbursement for: Primary General	11/20/97	189.75
Memphis, TN 38101	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ridgewell's Caterer, Inc.	reception expense	uay, you.,	
5525 Dorsey Lane	Disbursement for: Primary General	11/20/97	1,053.98
Bethesda, MD 20816	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lanier Worldwide, Inc.	office supplies	day, year)	
P. O. Box 105533	Disbursement for: Primary General	11/20/97	399.32
Atlanta, GA 30348	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Robert Watkins & Co., PA	acctng. & mgmt. services	day, year)	Disbursement This Period
610 S. Boulevard		11/21/97	3,430.24
Tampa, FL 33606	Disbursement for: Primary General Other (specify)	1	
F. Fuil Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	salary	day, year)	Disbursement This Period
2685 Cypress Bend Drive		12/01/97	635.40
Clearwater, FL 33761	Disbursement for: Primary General Other (specify)		
	Purpose of Disbursement	Date (month,	Amount of Each
G. Full Name, Mailing Address and ZIP Code	payroll taxes	day, year)	Disbursement This Perio
Bank of Tampa		12/01/97	192.68
P. O. Box 1	Disbursement for: Primary Genera		
Tampa, FL 33601	Other (specify) Purpose of Disbursement	Date (month,	Amount of Each
H. Full Name, Mailing Address and ZIP Code	' .	day, year)	Disbursement This Perio
U. S. Postmaster	postage	12/04/97	500.00
m 77 00601	Disbursement for: Primary General	1	
Tampa, FL 33601	Other (specify)	Date (month,	Amount of Each
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	day, year)	Disbursement This Peri
Mitch B. Bainwol	travel	12/04/97	855.94
8400 Cross Lake Drive	Disbursement for: Primary Genera		055.51
Fairfax Station, FL 22039	Other (specify)		
BTOTAL of DisbursementsThis Page (optional)		·····/	1
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ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE 15 OF 18
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NAME OF COMMITTEE (in Full)

Friends of Connie Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Arthur J. Finklestein & Assoc.	political consulting		6 060 77
16 N. Astor	Disbursement for: Primary General	12/04/97	6,860.77
Irving, NY 10533	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
W. James Wilson	travel		
2685 Cypress Bend Drive	Disbursement for: Primary General	12/04/97	1,445.55
Clearwater, FL 33761	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Giovanni Photography	photography		
1381 Airport Road, N.	Disbursement for: Primary General	12/04/97	397.50
Naples, FL 34104	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T	telephone expense		
P. O. Box 105501	Disbursement for: Primary General	12/04/97	238.38
Atlanta, GA 30348	Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Austin Development Co.	parking	day, year)	
P. O. Box 22197	Disbursement for: Primary General	12/04/97	27.76
Tampa, FL 33622	Other (specify)		<u> </u>
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Austin Development Co.	office rent	day, year)	Disbursement This Period
P. O. Box 22197		12/04/97	645.57
Tampa, FL 33622	Disbursement for: Primary General Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
l _	office supplies	day, year)	Disbursement This Period
Office Depot P. O. Box 182378		12/04/97	191.36
P. O. Box 182378 Columbus, OH 43218	Other (specify) Other (specify)	`	
· · · · · · · · · · · · · · · · · · ·	Purpose of Decursement	Date (month,	Amount of Each
H. Full Name, Mailing Address and ZIP Code	postage	day, year)	Disbursement This Perio
Direct Mail Productions		12/09/97	2,100.00
340 Scarlett Road	Disbursement for: Primary Genera	1	
Oldsmar, FL 34677	Other (specify)	Date (month,	Amount of Each
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement delivery expense	day, year)	Disbursement This Perio
Federal Express	denvery expense	12/11/97	100.75
P. O. Box 1140, Dept. A	Disbursement for: Primary Genera	1	
Memphis, TN 38101	Other (specify)	1	
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ITEMIZED DISBURSEMENTS

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Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
TE	telephone expense		
510 Morgan St.	Disbursement for: Primary Genera	12/11/97	527.14
Tampa, FL 33602	Other (specify)		
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zephyrhills Water Co.	office expense		21.35
3919 Highland Avenue	Disbursement for: Primary Genera	12/11/97	21.55
Гатра, FL 33603	Other (specify)		
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
udy W. Wilson	telephone expense		
2685 Cypress Bend Drive	Disbursement for: Primary Genera	12/11/97	224.84
Clearwater, FL 33761	Other (specify)	L	
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
W. James Wilson	travel		366.48
2685 Cypress Bend Drive	Disbursement for: Primary Gener	12/11/97	300.46
Clearwater, FL 33761	Other (specify)		
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capital Mailing Services	postage		
12200 Old Baltimore Road	Disbursement for: Primary Gener	12/11/97	2,933.35
Beltsville, MD 20705	Other (specify)		
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Robert Watkins & Co., PA	acctng. & mgmt. services	day, year)	
610 S. Boulevard	Disbursement for: Primary Gene	12/15/97	3,010.04
Tampa, FL 33606	Other (specify)		
3. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	salary	day, year)	Disbursement This Period
2685 Cypress Bend Drive	Disbursement for: Primary Gene	12/16/97	635.40
Clearwater, FL 33761	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Bank of Tampa	payroll taxes	day, year)	Disbursement This Period
P. O. Box 1	Disbursement for: Primary Gene	12/16/97	192.68
Tampa, FL 33601	Disbursement for: Primary Gene		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Judy W. Wilson	reception expense	day, year)	Disbursement This Period
2685 Cypress Bend Drive		12/18/97	384.03
Clearwater, FL 33761	Disbursement for: Primary Gene	erai	
Clearwater, PL 33701	Other (specify)		
Contract			k
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NAME OF COMMITTEE (in Full) Friends of Connie Mack Date (month, Amount of Each Purpose of Disbursement A, Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) printing Rinaldi Printing Co. 111.02 12/18/97 4514 Adamo Drive Disbursement for: Primary Tampa, FL 33605 Other (specify) Date (month, Amount of Each Purpose of Disbursement B, Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period office equipment Lanier Worldwide, Inc. 12/18/97 656.51 P. O. Box 105533 Disbursement for: Primary General Other (specify) Atlanta, GA 30348 Purpose of Disbursement Date (month. Amount of Each C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) reception expense Sheraton Grand Hotel 12,862.13 12/18/97 4860 W. Kennedy Blvd. Disbursement for: Primary General Other (specify) Tampa, FL 33609 Date (month, Amount of Each Purpose of Disbursement D. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) office equipment Dell Computer Corp. 2.971.91 12/23/97 One Dell Way General Disbursement for: Primary Round Rock, TX 78682 Other (specify) Amount of Each Purpose of Disbursement Date (month, E. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) survey Arthur J. Finklestein & Assoc. 12/23/97 24,000.00 Disbursement for: Primary General 16 N. Astor Irving, NY 10533 Other (specify) Date (month, Amount of Each F. Full Name, Mailing Address and ZIP Code Purpose of Disbursement day, year) Disbursement This Period Florida Dept. of Revenue income taxes 1.440.00 12/23/97 5050 W. Tennessee Street Disbursement for: Primary General Tallahassee, FL 32399 Other (specify) Purpose of Disbursement Date (month, Amount of Each G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) direct mail services Direct Mail Productions 12/23/97 3,422.20 340 Scarlett Road Disbursement for: Primary General Oldsmar, FL 34677 Other (specify) Date (month, Amount of Each Purpose of Disbursement H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) salary Judy W. Wilson 12/31/97 635.40 2685 Cypress Bend Drive Disbursement for: Primary General Clearwater, FL 33761 Other (specify) Date (month, Amount of Each Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) payroll taxes Bank of Tampa 12/31/97 192.68 P. O. Box 1 Disbursement for: Primary General Tampa, FL 33601 Other (specify) SUBTOTAL of DisbursementsThis Page (optional) TOTAL This Period (last page this line number only)

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ITEMIZED DISBURSEMENTS

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Friends of Connie		Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Peri
Bank of Tampa	guiess and El. Volo	deposit slip printing	day, year)	
P. O. Box 1		Disbursement for: Primary General	12/31/97	21.54
Tampa, FL 336	01	Other (specify)		
B. Full Name, Mailing Ad		Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Pe
		Disbursement for: Primary General Other (specify)		
C. Full Name, Mailing A	ddress and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Pe
		Disbursement for: Primary General Other (specify)		
D. Full Name, Mailing A	ddress and ZiP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Pe
		Disbursement for: Primary Genera	Ī	
E. Full Name, Mailing A	ddress and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This P
		Disbursement for: Primary General Other (specify)	ali	
F. Full Name, Mailing A	ddress and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This F
		Disbursement for: Primary General Other (specify)	al	
G. Full Name, Mailing	Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This I
		Disbursement for: Primary Gener	al	
H. Full Name, Mailing	Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Eac Disbursement This
		Disbursement for: Primary General Other (specify)	ral	
I. Full Name, Mailing A	ddress and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Eac Disbursement This
		Disbursement for: Primary General Other (specify)	ral	

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NAME OF COMMITTEE (in Full) Friends of Connie Mack Date (month, Amount of Each Purpose of Disbursement A, Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Charles L. Grannon 850.00 9/04/97 248 Kay Palm Road General Disbursement for: Primary Other (specify) Boca Raton, FL 33432 Date (month. Amount of Each Purpose of Disbursement 8. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period contribution refund Mary O. Bush 250.00 10/10/97 P. O. Box 1546 Disbursement for: Primary General Hobe Sound, FL 33455 Other (specify) Amount of Each Purpose of Disbursement Date (month, C. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Alan J. Kluger 500.00 10/16/97 1000 W. Island Blvd., #2909 Disbursement for: Primary Williams Island, FL 33160 Other (specify) Purpose of Disbursement Date (month, Amount of Each D. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Robert Cade 500.00 10/16/97 529 N.W. 58th Street Disbursement for: Primary Gainesville, FL 32607 Other (specify) Amount of Each Date (month, Purpose of Disbursement E. Fuil Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Mervl Eriksson 600.00 10/30/97 7148 Estero Blvd., #321 General Disbursement for: Primary Ft. Myers Beach, FL 33931 Other (specify) Amount of Each Date (month, Purpose of Disbursement F. Full Name, Mailing Address and ZIP Code day, year) Disbursement This Period contribution refund David H. Rush 400.00 10/30/97 700 N.W. 12th Avenue Disbursement for: Primary Deerfield Beach, FL 33442 Other (specify) Purpose of Disbursement Date (month, Amount of Each G. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Paula Pendergast 10/30/97 1.000.00 576 E. Rambling Drive Disbursement for: Primary General West Palm Beach, FL 33414 Other (specify) Amount of Each Date (month, Purpose of Disbursement H. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Ellice McDonald, Jr. 1,000.00 10/30/97 3801 Kennett Pike, C-300 Disbursement for: Primary General Greenville, DE 19807 Other (specify) Amount of Each Date (month, Purpose of Disbursement I. Full Name, Mailing Address and ZIP Code Disbursement This Period day, year) contribution refund Robert Cade 500.00 11/13/97 529 N.W. 58th Street Disbursement for: | Primary | General Gainesville, FL 32607 Other (specify) SUBTOTAL of DisbursementsThis Page (optional) TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

Friends of Connie Mack

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Meryl Eriksson	contribution refund		
7148 Estero Blvd., #321	Disbursement for: Primary General	11/13/97	200.00
Ft. Myers Beach, FL 33931	Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert M. Beall, II	contribution refund		
P. O. Box N	Disbursement for: Primary General	11/13/97	2,000.00
Bradenton, FL 34206	Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
John J. Morrison	contribution refund	day, year)	Disbursement This Period
531 Indian Harbor Road	Disbursement for: Primary General	11/20/97	200.00
Vero Beach, FL 32963	Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Preston A. Wells, Jr.	contribution refund	day, year)	Disbursement This Period
P. O. Box 1720	Dispussement for: Primary General	11/26/97	1,000.00
Ft. Landerdale, FL 33302	Dispursement for: Primary General Other (specify)		
	Purpose of Disbursement	Date (month,	Amount of Each
E. Full Name, Mailing Address and ZIP Code Michael J. Petrina	contribution refund	day, year)	Disbursement This Period
100 Royal Palm Way		11/26/97	100.00
1 -	Disbursement for: Primary General		
Palm Beach, FL 33480	Other (specify)	Date (month,	Amount of Each
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement contribution refund	day, year)	Disbursement This Period
Jeno Paulucci	Commonion Icidia	12/04/97	250.00
201 W. First Street	Disbursement for: Primary General	123.77	250.50
Sanford, FL 32771	Other (specify)	<u> </u>	
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frederick M. Rothenberg	contribution refund	12/18/97	100.00
1817 Bayshore Blvd.	Disbursement for: Primary General		100.00
Tampa, FL 33606	Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard H. Vaughan	contribution refund		
1848 Southpointe Drive	Disbursement for: Primary Genera	12/23/97	1,000.00
Sarasota, FL 34231	Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each
Akshay Desai	contribution refund	day, year)	Disbursement This Period
8498 Tallahassee Drive, N.E.	Disbursement for: Primary General	12/23/97	100.00
St. Petersburg, FL 33702	Other (specify)		
SUBTOTAL of DisbursementsThis Page (optional)			
SUD I VIAL OF DISDUISEMENTS THIS Fage (optional)			-
TOTAL This Period (last page this line number only)		/	

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ITEMIZED DISBURSEMENTS

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

PAGE 0F 3

FOR LINE NUMBER 20a

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purposes, other than using the name and address of any political committee to solicit contributions from such committee.
Dulboses, tagle) than doing no name and address of any personal and address of any personal and address of any

NAME OF COMMITTEE (In Full)

Friends of Connie Mack

Т	A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	David J. Burke	contribution refund	uay, year)	Dispursement This Felloc
	17070 Ranho Street	Disbursement for: Primary General	12/23/97	250.00
- 1	Encino, CA 91316	Other (specify)	Ì	
f	B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary General		
- 1		Other (specify)		
	C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary General Other (specify)		
-	D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	•	Disbursement for: Primary General Other (specify)		
	E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary General Other (specify)		
	F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary General Other (specify)		
	G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary General Other (specify)		
	H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary Genera Other (specify)		
	I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary Genera Other (specify)		
SUB	TOTAL of DisbursementsThis Page (optional)			
<u></u>	AL This Period (last page this line number only)			10,800.00

Use separate schedule(s) for each category of the	PAGE	OF 1
Detailed Summary Page	FOR LINE NUMBER	

500.00

			Detailed Summary Page	FOR LINE NUMBER 21
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E OF COMMITTEE (in Full) riends of Connie Macl	ς			
A. Full Name, Mailing Address and	d ZIP Code	Purpose of Disbursement	Date (month,	Amount of Each Disbursement This Period
Jeb Bush for Governor		non-Federal contribution	day, year)	
9200 S. Dadeland Blvd.		Disbursement for: Primary	General 9/26/97	500.00
Miami, FL 33154		Other (specify)	·	
3. Full Name, Mailing Address an	d ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary	General	
		Other (specify)	·	
C. Full Name, Mailing Address an	d ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
		Disbursement for: Primary	General	
D. Full Name, Mailing Address an	d ZIP Code	Other (specify) Purpose of Disbursement	Date (month,	Amount of Each
			day, year)	Disbursement This Perio
		Disbursement for: Primary	General	
		Other (specify)	Date (month,	Amount of Each
E. Full Name, Mailing Address ar	nd ZIP Code	Purpose of Disbursement	day, year)	Disbursement This Perio
		Disbursement for: Primary	General	
		Other (specify)		ļ
F. Full Name, Mailing Address ar	nd ZIP Code	Purpose of Disbursement	Dale (month, day, year)	Amount of Each Disbursement This Perio
		Disbursement for. Primary	General	
		Other (specify)	-	
G. Full Name, Mailing Address a	nd ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Peri
		Disbursement for: Primary	General	
		Other (specify)		
H. Full Name, Mailing Address a	nd ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Per
		Disbursement for: Primary	General	
		Other (specify)		
I. Full Name, Mailing Address ar	nd ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Per
		Disbursement for: Primary Other (specify)	General	

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TOTAL This Period (last page this line number only)

SECRETARY

United States Senate

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