

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Floridians for a Strong Middle Class

ADDRESS (number and street) 1007 N Federal Hwy #317 Fort Lauderdale FL 33304 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00577049 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2016 through 06 / 30 / 2016

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 Jennifer May

Signature of Treasurer Jennifer May [Electronically Filed] Date 07 / 15 / 2016

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

Office Use Only table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Floridians for a Strong Middle Class**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		478072.02
(b) Cash on Hand at Beginning of Reporting Period.....	841346.87	
(c) Total Receipts (from Line 19) .....	32150.00	437150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	873496.87	915222.02
7. Total Disbursements (from Line 31).....	61285.72	103010.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	812211.15	812211.15
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Floridians for a Strong Middle Class**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	32000.00	437000.00
(ii) Unitemized .....	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32150.00	437150.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	32150.00	437150.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	32150.00	437150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	32150.00	437150.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	61285.72	103010.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	61285.72	103010.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	61285.72	103010.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61285.72	103010.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	32150.00	437150.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32150.00	437150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	61285.72	103010.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	61285.72	103010.87

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 17  
(check only one)

11a     11b     11c     12  
 13     14     15     16     17

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)  
**Floridians for a Strong Middle Class**

**A. James F. Ellis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3020 NE 32nd Ave  
Ste 110  
City Fort Lauderdale State FL Zip Code 33308-7233  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ellis Diversified Inc. Occupation President, Chairman, and Founder  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 05 / 19 / 2016  
Transaction ID : VR069GV5V56  
Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Eye Management, Inc.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2001 S Andrews Ave  
City Fort Lauderdale State FL Zip Code 33316-3429  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 06 / 30 / 2016  
Transaction ID : VR069H5D4Y6  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. Health Network One, Inc.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2001 S Andrews Ave  
City Fort Lauderdale State FL Zip Code 33316-3429  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 06 / 30 / 2016  
Transaction ID : VR069H5D4X8  
Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

**A. David W. Horvitz**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 E Las Olas Blvd  
Ste 2200

City Ft Lauderdale State FL Zip Code 33301-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer WLD Enterprises, Inc Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2016

**Transaction ID : VR069GV5V14**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. HS1 Medical Management, Inc.**  
Full Name (Last, First, Middle Initial)

Mailing Address 2001 S Andrews Ave

City Fort Lauderdale State FL Zip Code 33316-3429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : VR069H5D4W0**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Robert Lochrie III**  
Full Name (Last, First, Middle Initial)

Mailing Address 2330 Desota Dr

City Fort Lauderdale State FL Zip Code 33301-1524

FEC ID number of contributing federal political committee. **C**

Name of Employer Lochrie & Chakas P.A. Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2016

**Transaction ID : VR069GV5V30**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)  
**A. Starling Chevrolet**

Mailing Address 13155 S Orange Blossom Trl

City Orlando State FL Zip Code 32837-6599

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2016  
**Transaction ID : VR069H4PAJ6**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Starling GMC**

Mailing Address PO Box 700667

City Saint Cloud State FL Zip Code 34770-0667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2016  
**Transaction ID : VR069H4PAS1**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**c. David I.J. Wang**

Mailing Address 7575 Pelican Bay Blvd Apt 1902

City Naples State FL Zip Code 34108-5542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Forest Resources, LLC Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 18 / 2016  
**Transaction ID : VR069GKJRC0**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

**A. Peter Wittich**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2308 Inlet Dr  
 City Fort Lauderdale State FL Zip Code 33316-3620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Interstate Asphalt Occupation Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 05 / 2016  
**Transaction ID : VR069GQF9N4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	32000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	<b>FOR LINE NUMBER:</b> (check only one)	<b>PAGE 10 OF 17</b>
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28a <input type="checkbox"/> 28b <input type="checkbox"/> 28c <input type="checkbox"/> 29 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)  
**A. Cameron Beilly**

Mailing Address 907 SE 7th St

City Fort Lauderdale      State FL      Zip Code 33301-3021

Purpose of Disbursement  
Reimbursement (Vendors that aggregate over \$200 listed below)

Candidate Name

Office Sought:  House      Disbursement For:  Primary     General  
 Senate       Other (specify) ▼  
 President

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

**Transaction ID : VQZ71A74607**

Amount of Each Disbursement this Period  
111.93

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Office Depot**

Mailing Address 914 N Federal Hwy

City Fort Lauderdale      State FL      Zip Code 33304-2707

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House      Disbursement For:  Primary     General  
 Senate       Other (specify) ▼  
 President

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

**Transaction ID : VQZ71A8HEB4**

Amount of Each Disbursement this Period  
59.34

Memo Item \*

Full Name (Last, First, Middle Initial)  
**C. UPS**

Mailing Address 55 Glenlake Pkwy

City Atlanta      State GA      Zip Code 30328-3474

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House      Disbursement For:  Primary     General  
 Senate       Other (specify) ▼  
 President

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

**Transaction ID : VQZ71A8HED0**

Amount of Each Disbursement this Period  
35.06

Memo Item \*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	111.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 55 Glenlake Pkwy

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Transaction ID : VQZ71A8HEE8

Amount of Each Disbursement this Period

17.53

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Cameron Beilly**

Mailing Address 907 SE 7th St

City Fort Lauderdale State FL Zip Code 33301-3021

Purpose of Disbursement  
Reimbursement (Vendors that aggregate over \$200 listed below)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A7TB66

Amount of Each Disbursement this Period

224.97

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cameron Beilly**

Mailing Address 907 SE 7th St

City Fort Lauderdale State FL Zip Code 33301-3021

Purpose of Disbursement  
Mileage Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A8HFA7

Amount of Each Disbursement this Period

35.15

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

224.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. Office Depot**

Mailing Address 914 N Federal Hwy

City Fort Lauderdale State FL Zip Code 33304-2707

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A8HF59

Amount of Each Disbursement this Period

44.50

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Office Depot**

Mailing Address 914 N Federal Hwy

City Fort Lauderdale State FL Zip Code 33304-2707

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A8HF67

Amount of Each Disbursement this Period

109.89

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 Glenlake Pkwy

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
Mailbox Key

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A8HF75

Amount of Each Disbursement this Period

5.00

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address 55 Glenlake Pkwy

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A8HF81

Amount of Each Disbursement this Period

19.47

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 Glenlake Pkwy

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 15 / 2016

Transaction ID : VQZ71A8HF99

Amount of Each Disbursement this Period

10.96

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Jessica Clark**

Mailing Address 1489 Charmont Pl

City Fort Myers State FL Zip Code 33919-6917

Purpose of Disbursement  
Consultant - Fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Transaction ID : VQZ71A745H8

Amount of Each Disbursement this Period

7000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. Jessica Clark**

Mailing Address 1489 Charmont PI

City State Zip Code  
Fort Myers FL 33919-6917

Purpose of Disbursement  
Consultant - Fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ71A7TB74**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jessica Clark**

Mailing Address 1489 Charmont PI

City State Zip Code  
Fort Myers FL 33919-6917

Purpose of Disbursement  
Consultant - Fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ71A8HDX3**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. First Data**

Mailing Address 55 Glenlake Pkwy  
Ste 2000

City State Zip Code  
Atlanta GA 30328-3474

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VQZ71A8HDZ9**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. First Data**

Mailing Address 55 Glenlake Pkwy  
Ste 2000

City Atlanta State GA Zip Code 30328-3474

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2016

Transaction ID : VQZ71A8HE07

Amount of Each Disbursement this Period

13.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mercury Public Affairs, LLC**

Mailing Address 250 Greenwich St  
FI 36

City New York State NY Zip Code 10007-0040

Purpose of Disbursement  
Consultant - Strategy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2016

Transaction ID : VQZ71A7TB25

Amount of Each Disbursement this Period

17000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mercury Public Affairs, LLC**

Mailing Address 250 Greenwich St  
FI 36

City New York State NY Zip Code 10007-0040

Purpose of Disbursement  
Reimbursement (Vendors that aggregate over \$200 listed below)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2016

Transaction ID : VQZ71A7TB40

Amount of Each Disbursement this Period

677.47

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

17691.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. Expedia**

Mailing Address 333 108th Ave NE  
Ste 300

City Bellevue State WA Zip Code 98004-5736

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2016

Transaction ID : VQZ71A8HEY4

Amount of Each Disbursement this Period

302.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mercury Public Affairs, LLC**

Mailing Address 250 Greenwich St  
FI 36

City New York State NY Zip Code 10007-0040

Purpose of Disbursement  
Consultant - Strategy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2016

Transaction ID : VQZ71A7VKM2

Amount of Each Disbursement this Period

17000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Next Level Partners, LLC**

Mailing Address 410 1st St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Consultant - Compliance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2016

Transaction ID : VQZ71A74622

Amount of Each Disbursement this Period

650.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

17650.00

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Floridians for a Strong Middle Class**

Full Name (Last, First, Middle Initial)

**A. Next Level Partners, LLC**

Mailing Address 410 1st St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Consultant - Compliance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 02 / 2016

**Transaction ID : VQZ71A7TB82**

Amount of Each Disbursement this Period  
650.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Ave NW  
Ste 5

City Washington State DC Zip Code 20009-1039

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2016

**Transaction ID : VQZ71A8HDY1**

Amount of Each Disbursement this Period  
3836.25

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	4486.25
<b>TOTAL</b> This Period (last page this line number only)..... ▶	61224.47