

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Castor for Congress

ADDRESS (number and street)

301 W. Platt Street, #385

Check if different than previously reported. (ACC)

Tampa

FL

33606

2. FEC IDENTIFICATION NUMBER ▼

C C00410761

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

11

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2012

through

M M /

D D /

Y Y Y Y 2012

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 Amy Martin

Signature of Treasurer Amy Martin

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Castor for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	118672.00	642383.27
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	118672.00	642383.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	55897.97	205091.71
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	8591.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	55897.97	196500.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	765458.82	
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	

**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 3 (Revised 12/2003)

Write or Type Committee Name

**Castor for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	56450.00	347636.94
(ii) Unitemized.....	11222.00	59736.00
(iii) TOTAL of contributions from individuals ▶	67672.00	407372.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	51000.00	235010.33
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	118672.00	642383.27
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	8591.33
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	771.56	2552.45
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	119443.56	653527.05

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	55897.97	205091.71
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	35000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	55897.97	240091.71

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	701913.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	119443.56
25. SUBTOTAL (add Line 23 and Line 24).....	821356.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55897.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	765458.82

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

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

FOR LINE NUMBER: PAGE 5 OF 77  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Philip Adler M.D.**

Mailing Address 3507 Bayshore Blvd. Unit 1001

City Tampa State FL Zip Code 33629-8957

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

Name of Employer Health Point Medical Groups Occupation Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 16 / 2012**

**Transaction ID : C4515939**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Greg Arbutine**

Mailing Address 407 S. Westshore Blvd

City Tampa State FL Zip Code 33609

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

Name of Employer The Silver Queen Inc. Occupation CEO

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 19 / 2012**

**Transaction ID : C4517549**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Rosemary E. Armstrong**

Mailing Address 3415 W Mullen Avenue

City Tampa State FL Zip Code 33609

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

Name of Employer self Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : C4945374**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bret R. Azzarelli</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2012	
Mailing Address 7808 Rivershore Drive		<b>Transaction ID : C4932666</b>	
City Tampa	State FL	Amount of Each Receipt this Period 250.00	
Zip Code 33604			
FEC ID number of contributing federal political committee. C			
Name of Employer Elements Architects	Occupation Vice President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>B. Kevin Beckner</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2012	
Mailing Address 12911 Vicksburg Dr		<b>Transaction ID : C4930477</b>	
City Tampa	State FL	Amount of Each Receipt this Period 250.00	
Zip Code 33625			
FEC ID number of contributing federal political committee. C			
Name of Employer Financial Advisor	Occupation Self		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Liane Bennati</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 09 / 2012	
Mailing Address 39 W. Spanish Main St.		<b>Transaction ID : C4929552</b>	
City Tampa	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 33609			
FEC ID number of contributing federal political committee. C			
Name of Employer Amphitheatre Event Facility/Sunset Eve	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Bensmihen**

Mailing Address 17643 Bocaire Way

City Boca Raton	State FL	Zip Code 33487
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FEC ID number of contributing federal political committee. **C**

Name of Employer Boca Home Care Servicing	Occupation CEO
--	-------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4948264**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**William Berk**

Mailing Address 7360 SW 133 Tr

City Miami	State FL	Zip Code 33156
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FEC ID number of contributing federal political committee. **C**

Name of Employer Berk, Merchant & Sims PLC	Occupation Attorney
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940033**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6445 South Mitchell Manor Cir

City Miami	State FL	Zip Code 33156
---------------	-------------	-------------------

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

Name of Employer Capital Realty Services	Occupation President and Co-Owner
---	--------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940008**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>doris bigio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2012
Mailing Address 21141 n.e. 21st place		<b>Transaction ID : C4940899</b>
City north miami beach	State Zip Code FL 33179	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer house of travel	Occupation travel agent	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Joseph F. Bohren</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 28 / 2012
Mailing Address 9002 Aldwych Ct # 21		<b>Transaction ID : C4940642</b>
City Odessa	State Zip Code FL 33556	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>Jeffrey Borysiewicz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2012
Mailing Address 5737 Emerson Pointe Way		<b>Transaction ID : C4928870</b>
City Orlando	State Zip Code FL 32819	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Corona Cigar Company	Occupation Premium Cigar Retailer	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sara Brady**

Mailing Address 929 Garden Dr

City Winter Park State FL Zip Code 32789

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

Name of Employer Sara Brady PR Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932737**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**CiCi Brown**

Mailing Address 213 Riverside Drive

City Ormond Beach State FL Zip Code 32176

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4967918**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**J. Hyatt Brown**

Mailing Address 213 Riverside Drive

City Ormond Beach State FL Zip Code 32176

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

Name of Employer Brown and Brown Insurance Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4967917**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert F. Buckhorn Jr.**

Mailing Address 175 Baltic Circle

City Tampa State FL Zip Code 33606

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

Name of Employer City of Tampa Occupation Mayor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515935**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**L. Mark Carron**

Mailing Address 116 Adriatic Avenue

City Tampa State FL Zip Code 33606

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

Name of Employer Raymond James Occupation Registered Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515934**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address Withheld

City West Palm Beach State FL Zip Code 33401

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

Name of Employer State of Florida Occupation Behavior Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4936940**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1000.00

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

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

FOR LINE NUMBER: PAGE 11 OF 77  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roger Chapin**

Mailing Address 1600 West Ivanhoe Blvd

City State Zip Code  
Orlando FL 32804

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

Name of Employer Occupation  
Mears Transportation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4928785**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald A. Christaldi**

Mailing Address 3321 W Carrington Street

City State Zip Code  
Tampa FL 33629

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

Name of Employer Occupation  
Schumaker, Loop & Kendrick Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515946**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ronald A. Christaldi**

Mailing Address 3321 W Carrington Street

City State Zip Code  
Tampa FL 33629

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

Name of Employer Occupation  
Schumaker, Loop & Kendrick Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012

**Transaction ID : C4939106**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional).....

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael J. Cimino**

Mailing Address 3000 West San Isidro Street

City Tampa State FL Zip Code 33629

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

Name of Employer Cimino Salon Occupation Hair Stylist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : C4932706**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jo Anne Dain**

Mailing Address 6532 Moorings Point Circle Unit 10

City Lakewood Ranch State FL Zip Code 34202

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : C4945109**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Karen J. Dalton**

Mailing Address 505 S. Riverhills Dr.

City Temple Terrace State FL Zip Code 33617

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

Name of Employer not applicable Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 02 / 2012**

**Transaction ID : C4645654**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Georgia R. Danahy**

Mailing Address 2902 W Bayshore Court

City Tampa State FL Zip Code 33611-2808

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

Name of Employer None Occupation Retired Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2012**

**Transaction ID : C4939140**

Amount of Each Receipt this Period  
**50.00**

**B.** Full Name (Last, First, Middle Initial)  
**Matthew R. Danahy**

Mailing Address 705 S Boulevard

City Tampa State FL Zip Code 33606

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

Name of Employer Danahy and Murray Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **725.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : C4940631**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**David de la Parte**

Mailing Address 3019 Villa Rosa Park

City Tampa State FL Zip Code 33611

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

Name of Employer Executive VP/Genl Counsel Occupation H Lee Moffitt Cancer Center

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : C4932697**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**250.00**

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 14 OF 77

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Helen W. De La Parte**

Mailing Address 3435 Bayshore Blvd  
 Apt 1700

City Tampa State FL Zip Code 33629

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4932698**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Paula DeNisco**

Mailing Address 939 Normandy Trace Road

City Tampa State FL Zip Code 33602-5921

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

Name of Employer BayCare Health Care Occupation Business Development

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2012

**Transaction ID : C4922435**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 7777 Glades Road  
 Suite 300

City Boca Raton State FL Zip Code 33434

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

Name of Employer Broad and Cassel Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2012

**Transaction ID : C4934935**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Diaz**

Mailing Address 800 S Dakota Ave #401

City Tampa State FL Zip Code 33606

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

Name of Employer Gulfcoast Oncology Associates Occupation Medical Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4929498**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Philip T. Dinkins**

Mailing Address 2621 South Bryant Circle

City Tampa State FL Zip Code 33629-7510

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

Name of Employer CLW Real Estate Services Occupation Commercial Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4932709**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1404 Storington Avenue

City Brandon State FL Zip Code 33511

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

Name of Employer Shumaker Loop & Kendrick L L P Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515945**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Evens**

Mailing Address 13689 Longs Landing Rd W

City Jacksonville State FL Zip Code 32225-5423

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

Name of Employer Self-Employed Occupation Researcher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 14 / 2012**

**Transaction ID : C4515836**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Tiffany Faddis**

Mailing Address 3210 Stonewood Ct

City Orlando State FL Zip Code 32806

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

Name of Employer Faddis and Faddis Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2012**

**Transaction ID : C4932750**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 4601 Ponce De Leon Blvd #300

City Miami State FL Zip Code 33146

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

Name of Employer Capital Realty Services, Inc. Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2012**

**Transaction ID : C4939989**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**600.00**



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

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

FOR LINE NUMBER: PAGE 17 OF 77  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jason M. Goldman**

Mailing Address 12914 Hyland Circle

City State Zip Code  
Boca Raton FL 33428

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 25 2012

**Transaction ID : C4939949**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy B Goodman**

Mailing Address 105 Westchester

City State Zip Code  
Saint Simons Island GA 31522

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 26 2012

**Transaction ID : C4536429**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Benjamin H. Gordon**

Mailing Address 44 Cocoanut Row

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
BG Strategic Advisors Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 31 2012

**Transaction ID : C4968164**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

4000.00

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

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

FOR LINE NUMBER: PAGE 18 OF 77  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Gould**

Mailing Address 10463 Greendale Dr

City Tampa State FL Zip Code 33626

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

Name of Employer Jewish Community Center Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : C4515681**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Greenbaum**

Mailing Address 7618 Stockton Terrace

City Boca Raton State FL Zip Code 33433

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

Name of Employer Hudson Holdings Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C4939665**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Edward E. Gunning Jr.**

Mailing Address 2923 W. Hawthorne Rd

City Tampa State FL Zip Code 33611

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

Name of Employer Smith-Mary Pond PA Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4937983**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

\_\_\_\_\_ 1500.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Edward E. Haddock Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2012
Mailing Address 3300 University Boulevard Suite 218		<b>Transaction ID : C4932753</b>
City Winter Park	State FL	
Zip Code 32792		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Full Sail	Occupation CEO	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Laura May Hainisch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2012
Mailing Address 8520 Gardenia Dr		<b>Transaction ID : C4536423</b>
City Seminole	State FL	
Zip Code 33777		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>C. Laura May Hainisch</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2012
Mailing Address 8520 Gardenia Dr		<b>Transaction ID : C4968153</b>
City Seminole	State FL	
Zip Code 33777		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Hegeman**

Mailing Address 1339 Old Oak Lane

City Naples State FL Zip Code 34110

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

Name of Employer n/a Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : C4944959**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Clay Henderson**

Mailing Address 200 S Orange Ave

City Orlando State FL Zip Code 32801

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

Name of Employer Holland & Knight Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2012**

**Transaction ID : C4932745**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 81 Shore Drive West

City Coconut Grove State FL Zip Code 33133

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

Name of Employer Peretz Chesaz & Herrmann Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : C4939835**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**1600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stuart Himmelstein**

Mailing Address 1111 N Palmway

City Lake Worth State FL Zip Code 33460

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

Name of Employer Quality Medical Associates Occupation Internist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939951**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**John William Holloway**

Mailing Address 6201 Matchett Road

City Orlando State FL Zip Code 32809

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

Name of Employer Self Occupation Poet / Designer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2012

**Transaction ID : C4593376**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**John William Holloway**

Mailing Address 6201 Matchett Road

City Orlando State FL Zip Code 32809

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

Name of Employer Self Occupation Poet / Designer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 17 / 2012

**Transaction ID : C4593377**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer Holmberg**

Mailing Address 5001 W San Jose St

City Tampa State FL Zip Code 33629

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

Name of Employer Self Occupation Independent Events Services Profession

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4939199**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lars Houmann**

Mailing Address 2617 Orchard Drive

City Apopka State FL Zip Code 32712

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

Name of Employer Florida Hospital Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932741**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael D. Joblove**

Mailing Address 3344 Bimini Ave

City Hollywood State FL Zip Code 33026

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

Name of Employer Genovese, Joblove & Battista PA Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940035**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bernard Kaminetsky**

Mailing Address 7991 Tennyson Ct

City State Zip Code  
Boca Raton FL 33433

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

Name of Employer Occupation  
Cohen Colton Kaminetsky Morris Medical Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940016**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**David Kay**

Mailing Address 7958 Tennyson Ct

City State Zip Code  
Boca Raton FL 33433

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

Name of Employer Occupation  
Center for Pediatric ENT Medical Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940040**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Lonni S. Kehoe**

Mailing Address 3021 West Lawn Avenue

City State Zip Code  
Tampa FL 33611

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 01 / 2012

**Transaction ID : C4645648**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1750.00

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

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

FOR LINE NUMBER: PAGE 24 OF 77  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Julie Pauline Kendig-Schrader**

Mailing Address 450 South Orange Avenue  
Suite 650

City Orlando State FL Zip Code 32801

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

Name of Employer Greenberg Traurig Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 15 / 2012

**Transaction ID : C4932744**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Devall C King**

Mailing Address 4078 Groveland Ave

City Sarasota State FL Zip Code 34231

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 26 / 2012

**Transaction ID : C4939191**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3125 W Villa Rosa St

City Tampa State FL Zip Code 33611

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

Name of Employer Florida Executive Realty Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2012

**Transaction ID : C4932704**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....

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

400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Lavey M.D.**

Mailing Address 13705 Sun Ct

City Tampa State FL Zip Code 33624

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

Name of Employer Moffitt Occupation Doctor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515951**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Penny A. Levin**

Mailing Address 355 Boca Ceiga Dr

City Madeira Beach State FL Zip Code 33708

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

Name of Employer Semi-retired Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2012

**Transaction ID : C4929554**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Penny A. Levin**

Mailing Address 355 Boca Ceiga Dr

City Madeira Beach State FL Zip Code 33708

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

Name of Employer Semi-retired Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 22 / 2012

**Transaction ID : C4934857**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew J Lewis**

Mailing Address 3107 W Fountain Blvd

City Tampa State FL Zip Code 33609

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

Name of Employer Haas Lewis Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2012

**Transaction ID : C4515839**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**David A. Lewis**

Mailing Address 8780 Northwest 18 Street

City Coral Springs State FL Zip Code 33071

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

Name of Employer Tempeton Occupation Mutual Funds Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939965**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**David A. Linsky**

Mailing Address 953 Harbour Bay Drive

City Tampa State FL Zip Code 33602

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

Name of Employer Linsky Lithographics Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : C4536389**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy R. Linsky**

Mailing Address 953 Harbour Bay Drive

City Tampa State FL Zip Code 33602

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 17 / 2012

**Transaction ID : C4536390**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Samuel R. Linsky**

Mailing Address 4401 West Dale Ave.

City Tampa State FL Zip Code 33609

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

Name of Employer J.P. Morgan Occupation VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515944**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Catherine F. Linton**

Mailing Address 6951 Abbeyville Rd

City Melbourne State FL Zip Code 32940-6667

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

Name of Employer Retired Occupation Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 02 / 28 / 2012

**Transaction ID : C4929544**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ernest C. Lisi**

Mailing Address 940 Harbour Bay Drive

City Tampa State FL Zip Code 33602

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

Name of Employer Self-Employed Occupation Management Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2012**

**Transaction ID : C4939194**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Roberta Loomar**

Mailing Address 5411 N 36th Ct

City Hollywood State FL Zip Code 33021

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

Name of Employer Watson Pharmaceuticals Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2012**

**Transaction ID : C4939666**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 1601 Sahlman Dr

City Tampa State FL Zip Code 33605

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

Name of Employer International Ship Repair Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2012**

**Transaction ID : C4932710**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**2150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jocelyn Lowe**

Mailing Address 2346 South Queen Street

City State Zip Code  
Arlington VA 22202

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

Name of Employer Occupation  
The Twenty-First Century Group Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 10 / 2012

**Transaction ID : C4472604**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Lundy**

Mailing Address 3203 Bayshore Blvd #1802

City State Zip Code  
Tampa FL 33629

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

Name of Employer Occupation  
Self HRC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 14 / 2012

**Transaction ID : C4932655**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 600 N Westshore Blvd Ste 1200

City State Zip Code  
Tampa FL 33602

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

Name of Employer Occupation  
Amscot Financial Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 28 / 2012

**Transaction ID : C4940502**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Maher</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2012
Mailing Address 631 West Morse Boulevard Suite 200		<b>Transaction ID : C4929556</b>
City Winter Park	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Maher Guiley and Maher	Occupation Attorney	Election Cycle-to-Date 750.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Michael Maher</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2012
Mailing Address 616 Seminole Dr		<b>Transaction ID : C4929557</b>
City Winter Park	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Maher Law Firm	Occupation Attorney	Election Cycle-to-Date 250.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Amy S. Mandel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 16 / 2012
Mailing Address 7195 Islamorada Cir		<b>Transaction ID : C4929064</b>
City Deminole	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Naturally Green Products	Occupation Vice President	Election Cycle-to-Date 500.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph Marcadis**

Mailing Address 4913 St. Croix Dr.

City Tampa State FL Zip Code 33629

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

Name of Employer Marcadis Law Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : C4515623**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Philip Marty**

Mailing Address 9307 Rockrose Dr

City Tampa State FL Zip Code 33647

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

Name of Employer USF Health Office of Research Occupation Associate Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4929535**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2494 S Ocean Blvd # M-1

City Boca Raton State FL Zip Code 33432

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940025**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1000.00

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

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

FOR LINE NUMBER: PAGE 32 OF 77  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karen A. Moffitt**

Mailing Address 403 Barbara Lane

City Tampa State FL Zip Code 33609

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4929527**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CRAIG NEWMAN**

Mailing Address 3305 W Kennedy Blvd

City Tampa State FL Zip Code 33609

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

Name of Employer Craig Newman DC PA Occupation Chiropractic Physician

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515959**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Elaine W Newman**

Mailing Address 3435 Bayshore Blvd, #800

City Tampa State FL Zip Code 33629

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4948261**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1350.00



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

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

FOR LINE NUMBER: PAGE 33 OF 77  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce Nierenberg**

Mailing Address 1369 Lexington Ave

City Davenport State FL Zip Code 33837

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

Name of Employer United Caribbean Lines Occupation Chairman/CEO

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932742**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Bruce Nierenberg**

Mailing Address 1369 Lexington Ave

City Davenport State FL Zip Code 33837

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

Name of Employer United Caribbean Lines Occupation Chairman/CEO

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932743**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Karen O'Connor**

Mailing Address 4383 Westover PI NW

City Washington State DC Zip Code 20016

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

Name of Employer American University Occupation Professor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 14 / 2012

**Transaction ID : C4515841**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cathy A. Ordiway**

Mailing Address 4357 Wheatland Way

City Palm Harbor	State FL	Zip Code 34685
---------------------	-------------	-------------------

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

Name of Employer Self	Occupation Tai Chi Instructor
--------------------------	----------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4967909**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Leslie F Osterweil**

Mailing Address 120 Martinique Ave

City Tampa	State FL	Zip Code 33606-4049
---------------	-------------	------------------------

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

Name of Employer Tampa Museum of Art	Occupation Chairman
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2012

**Transaction ID : C4515849**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 8511 Van Dyke Rd

City Odessa	State FL	Zip Code 33556
----------------	-------------	-------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 14 / 2012

**Transaction ID : C4515835**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

700.00

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

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

FOR LINE NUMBER: PAGE 35 OF 77  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lauren Pepin**

Mailing Address 8511 Van Dyke Rd

City Odessa State FL Zip Code 33556

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515964**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Nicolas Q Porter**

Mailing Address 4003 W DeLeon St

City Tampa State FL Zip Code 33609

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

Name of Employer de la Parte & Gilbert PA Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4930468**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 5224 Fairway One Dr

City Valrico State FL Zip Code 33596

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4932653**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional).....

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Scott A. Randolph**

Mailing Address 1400 Mount Vernon Street

City Orlando State FL Zip Code 32803

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

Name of Employer State of Florida Occupation Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932740**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Michelle Rehwinkel Vasilinda**

Mailing Address 3018 Brandemere Dr

City Tallahassee State FL Zip Code 32312

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

Name of Employer Florida House of Representatives Occupation State Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2012

**Transaction ID : C4643986**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**John S Rettig**

Mailing Address 7400 Park Drive

City Tampa State FL Zip Code 33610

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

Name of Employer Moffitt Cancer Center Occupation Director of Materiel Management

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4932682**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rita Richman**

Mailing Address 5757 Gulf of Mexico Drive Apartmen  
Apartment 218

City Longboat Key State FL Zip Code 34228-1700

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

Name of Employer Textile Consulting Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2012

**Transaction ID : C4929545**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Patricia B. Riggs**

Mailing Address 3419 Lacewood Road

City Tampa State FL Zip Code 33618

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515968**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Sam Rosales Jr**

Mailing Address 3405 Burlington Woods Ct

City Lutz State FL Zip Code 33559

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4939181**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**450.00**

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

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

FOR LINE NUMBER: PAGE 38 OF 77  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Ross**

Mailing Address 15403 Lake Magdalene Blvd

City Tampa State FL Zip Code 33613

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

Name of Employer Cohen & Foster Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : C4515676**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**John Ruffier**

Mailing Address 3701 Lake Sarah Drive

City Orlando State FL Zip Code 32804

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

Name of Employer Lowndes, Drosdick, Doster, Kantor & Re Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932754**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 3501 Bayshore Boulevard

City TAMPA State FL Zip Code 33629-8901

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2012

**Transaction ID : C4469828**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cathy Scharrer Sena**

Mailing Address 1301 NE 104 St

City Miami Shores State FL Zip Code 33138

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

Name of Employer Stellar Solutions LLC Occupation Health Care

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939953**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gerold L Schiebler MD**

Mailing Address 408 Beachside Place

City Amelia Island State FL Zip Code 32034-6551

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

Name of Employer Self Occupation Health care consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4939184**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1950 Thatch Palm Dr

City Boca Raton State FL Zip Code 33432

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939971**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Sena**

Mailing Address 157 Biscayne Ave

City Tampa State FL Zip Code 33606

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

Name of Employer Mars Communications Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515950**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jane Shivers**

Mailing Address 5210 Interbay Blvd. #9

City Tampa State FL Zip Code 33611

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

Name of Employer Shivers Consulting Occupation Business Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : C4968156**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Barbara K Sinnott**

Mailing Address 9666 Oak Street NE

City St. Petersburg State FL Zip Code 33702

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : C4944958**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional).....

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

950.00



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

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

FOR LINE NUMBER: PAGE 41 OF 77  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Reece Smith Jr.**

Mailing Address 2 Adalia Avenue  
# 801

City Tampa State FL Zip Code 33606

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

Name of Employer Carlton Fields Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4939210**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Jake Snell**

Mailing Address 1700 3rd Ave. W. Apt. 107

City BRADENTON State FL Zip Code 34205

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

Name of Employer RERTIRED Occupation FARMER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C4939246**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Marvis R. Snell**

Mailing Address 1700 3rd Ave W Apt 107

City Bradenton State FL Zip Code 34205

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C4939253**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1100.00

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

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

FOR LINE NUMBER: PAGE 42 OF 77  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cyrus Spurlino**

Mailing Address 7214 N Mobley Road

City Odessa State FL Zip Code 33556-2303

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

Name of Employer Westroc Occupation Vice President

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4939196**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 750.00

**B.** Full Name (Last, First, Middle Initial)  
**Bob Tankel**

Mailing Address 1022 Main Street

City Dunedin State FL Zip Code 34698

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2012

**Transaction ID : C4515629**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 921 Anchorage Rd

City Tampa State FL Zip Code 33602

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

Name of Employer Taub Ventures Occupation President

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515953**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bill Wagner**

Mailing Address 901 Mariner Way

City Tampa State FL Zip Code 33602

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

Name of Employer Wagner, Vaughan, et. Al Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4967923**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Lou Warner**

Mailing Address 178 23rd Avenue North

City St Petersburg State FL Zip Code 33704

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4937981**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jean E. Wilson Sr.**

Mailing Address 1720 Conway Isle Circle

City Orlando State FL Zip Code 32809

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

Name of Employer Greenberg Traurig Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 20 / 2012

**Transaction ID : C4939125**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roger M. Wise**

Mailing Address 5350 Lake Le Clare Road

City State Zip Code  
Lutz FL 33558

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

Name of Employer Occupation  
N/A Retired Chemist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4939206**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Jay Wolfson**

Mailing Address P.O. Box 342548

City State Zip Code  
Tampa FL 33694

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2012

**Transaction ID : C4934045**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Woodroffe III**

Mailing Address 2805 Samara Drive

City State Zip Code  
Tampa FL 33618

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2012

**Transaction ID : C4929540**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional).....

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 77
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rick Woods**

Mailing Address 809 S Boulevard

City Tampa State FL Zip Code 33606

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

Name of Employer Keller Williams Realty Occupation Realtor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4940813**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Brian Zuckerman**

Mailing Address 19815 Sea Rider Way

City Lutz State FL Zip Code 33559

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515938**

Amount of Each Receipt this Period  
 500.00

**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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

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

1000.00

56450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ACP Services PAC**

Mailing Address 25 Massachusetts Ave, NW  
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00403881**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939974**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AKIN, GUMP, STRAUSS, HAUER & FELD LLP CIVIC ACTION**

Mailing Address 1333 NEW HAMPSHIRE AVE/NW STE 400

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00104901**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : C4968256**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Association for Justice PAC**

Mailing Address 1050 31st Street N.W.

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : C4968422**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARAT**

Mailing Address 222 South Prospect Ave  
C/o Finance Department

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 28 / 2012

**Transaction ID : C4929546**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Chiropractic Association PAC**

Mailing Address 1701 Clarendon Blvd

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2012

**Transaction ID : C4971189**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American College of Radiology Association PAC**

Mailing Address 505 9th St NW  
Suite 910

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2012

**Transaction ID : C4968419**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Health Care Association PAC**

Mailing Address 1201 L Street Northwest

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939976**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Optometric Association PAC**

Mailing Address 1505 Prince Street Suite 300

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012

**Transaction ID : C4968165**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address PO Box 271082

City TAMPA State FL Zip Code 33688

FEC ID number of contributing federal political committee. **C** C00155713

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2012

**Transaction ID : C4515932**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

6000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BECAUSE I CARE POLITICAL ACTION COMMITTEE (BICPAC)**

Mailing Address 2494 S. OCEAN BLVD. #M-1

City BOCA RATON State FL Zip Code 33432

FEC ID number of contributing federal political committee. **C** C00381624

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940103**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 7805 NW Beacon Square Blvd Ste 201

City Boca Raton State FL Zip Code 33487

FEC ID number of contributing federal political committee. **C** C00478677

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940112**

Amount of Each Receipt this Period  
 3000.00

**C.** Full Name (Last, First, Middle Initial)  
**Bright House Networks LLC PAC**

Mailing Address 1155 21st Street NW Suite 300

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00402875

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C4932752**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Ave NW  
Suite 560-South

City Washington State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : C4968411**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**DRIVE Committee**

Mailing Address 25 Louisiana Avenue Northwest

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4967925**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**General Dynamics Corporation Political Action Committee**

Mailing Address 2941 Fairview Park Dr.  
Suite 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2012

**Transaction ID : C4967924**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Greenberg Traurig Political Action Committee**

Mailing Address 1221 Brickell Avenue

City Miami State FL Zip Code 33131

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : C4968263**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**HARRIS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1025 W. NASA BLVD.

City MELBOURNE State FL Zip Code 32919

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : C4968264**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HOSPIRA INC PAC LLC**

Mailing Address 275 N FIELD DRIVE  
HI - 4S DEPT GVAF

City LAKE FOREST State IL Zip Code 60045

FEC ID number of contributing federal political committee. **C** C00433284

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2012

**Transaction ID : C4968258**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**International Brotherhood of Boilermakers**

Mailing Address 753 State Avenue  
Suite 565

City Kansas City State KS Zip Code 66101

FEC ID number of contributing federal political committee. **C C00005157**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 13 / 2012

**Transaction ID : C4930009**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ironworkers Political Action League**

Mailing Address 1750 New York Avenue Northwest  
Suite 400

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 25 / 2012

**Transaction ID : C4939095**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**McDonald's Political Action Committee**

Mailing Address 2111 McDonald's Drive

City Oak Brook State IL Zip Code 60523

FEC ID number of contributing federal political committee. **C C00063164**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 30 / 2012

**Transaction ID : C4538574**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ACTION COMMITTEE (NACPAC)**

Mailing Address 3389 SHERIDAN ST.  
#424

City State Zip Code  
HOLLYWOOD FL 33021

FEC ID number of contributing federal political committee. **C** C00147983

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940087**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ACTION COMMITTEE (NACPAC)**

Mailing Address 3389 SHERIDAN ST.  
#424

City State Zip Code  
HOLLYWOOD FL 33021

FEC ID number of contributing federal political committee. **C** C00147983

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : C4940104**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Emergency Political Action Committee**

Mailing Address 1125 Executive Circle

City State Zip Code  
Irving TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : C4939096**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**New York Life Political Action Committee**

Mailing Address 51 Madison Avenue  
Room 1109

City State Zip Code  
New York NY 10010

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2012**

**Transaction ID : C4939119**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Publix Super Markets Associates PAC**

Mailing Address PO BOX 407

City State Zip Code  
Lakeland FL 33802

FEC ID number of contributing federal political committee. **C C00400705**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2012**

**Transaction ID : C4968409**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address PO Box 15441

City State Zip Code  
Washington DC 20003-0441

FEC ID number of contributing federal political committee. **C C00507053**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2012**

**Transaction ID : C4932757**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**6000.00**

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

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

FOR LINE NUMBER: PAGE 55 OF 77  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUN POLITICAL ACTION COMMITTEE (SUNPAC)**

Mailing Address 999 PONCE DE LEON BOULEVARD  
SUITE 625

City State Zip Code  
CORAL GABLES FL 33134

FEC ID number of contributing federal political committee. **C** C00378216

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2012

**Transaction ID : C4940111**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**United States Sugar Corp. PAC**

Mailing Address 111 Ponce De Leon Ave

City State Zip Code  
Clewiston FL 33440

FEC ID number of contributing federal political committee. **C** C00234120

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 23 / 2012

**Transaction ID : C4939149**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Verizon Communications, Inc. Good Government Club**

Mailing Address 1717 Arch Street 47-S

City State Zip Code  
Philiadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2012

**Transaction ID : C4968278**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

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

4500.00

51000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 77
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>NorthStar Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2012
Mailing Address 400 N Ashley Drive		<b>Transaction ID : C4538586</b>
City Tampa	State FL	Zip Code 33602
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 279.25	
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2252.31	

Full Name (Last, First, Middle Initial) <b>NorthStar Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 29 / 2012
Mailing Address 400 N Ashley Drive		<b>Transaction ID : C4646729</b>
City Tampa	State FL	Zip Code 33602
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 260.57	
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2252.31	

Full Name (Last, First, Middle Initial) <b>NorthStar Bank</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2012
Mailing Address 400 N Ashley Drive		<b>Transaction ID : C4971412</b>
City Tampa	State FL	Zip Code 33602
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 231.74	
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2252.31	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	771.56
<b>TOTAL</b> This Period (last page this line number only).....	771.56



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P.O. Box 297812		Amount of Each Disbursement this Period 41.66 <b>Transaction ID : D265149</b>
City Fort Lauderdale	State FL	
Zip Code 33329	Purpose of Disbursement Merchant fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address P.O. Box 297812		Amount of Each Disbursement this Period 2.95 <b>Transaction ID : D267792</b>
City Fort Lauderdale	State FL	
Zip Code 33329	Purpose of Disbursement Merchant fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2012
Mailing Address P.O. Box 297812		Amount of Each Disbursement this Period 103.27 <b>Transaction ID : D270574</b>
City Fort Lauderdale	State FL	
Zip Code 33329	Purpose of Disbursement Merchant fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	147.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A. AT&T Mobility**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement Telephone  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 13 / 2012

Amount of Each Disbursement this Period: 168.42

Transaction ID : D265147

**B. AT&T Mobility**

Full Name (Last, First, Middle Initial)  
Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342

Purpose of Disbursement Telephone  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 23 / 2012

Amount of Each Disbursement this Period: 271.54

Transaction ID : D267783

**C. Bistro Bis**

Full Name (Last, First, Middle Initial)  
Mailing Address 15 E Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement Telephone  
Fundraising event - food & beverage  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 30 / 2012

Amount of Each Disbursement this Period: 993.07

Transaction ID : D270569

**SUBTOTAL** of Disbursements This Page (optional) ..... 1433.03

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 77		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brey &amp; Company, CPA's, PA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 35 Davis Boulevard		Amount of Each Disbursement this Period 5143.02 <b>Transaction ID : D265160</b>
City Tampa	State FL Zip Code 33606	
Purpose of Disbursement Accounting services & postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Citrus Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 255 S Orange Avenue, Suite 1800		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D269760</b>
City Orlando	State FL Zip Code 32801	
Purpose of Disbursement Fundraising event deposit-room, food & beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Citrus Club</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 255 S Orange Avenue, Suite 1800		Amount of Each Disbursement this Period 925.38 <b>Transaction ID : D269761</b>
City Orlando	State FL Zip Code 32801	
Purpose of Disbursement Fundraising event-room, food & beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6568.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A. First Data**

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342-4756

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 05 / 2012

Amount of Each Disbursement this Period: 144.26

Transaction ID : D269759

**B. First Data**

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342-4756

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 03 / 2012

Amount of Each Disbursement this Period: 121.85

Transaction ID : D265137

**C. First Data**

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE

City Atlanta State GA Zip Code 30342-4756

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 03 / 2012

Amount of Each Disbursement this Period: 66.46

Transaction ID : D265138

**SUBTOTAL** of Disbursements This Page (optional) ..... 332.57

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Florida GLBT Democratic Caucus</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address P.O. Box 7492			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D267789</b>
City Fort Lauderdale	State FL	Zip Code 33338	
Purpose of Disbursement Conference sponsorship		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Florida UC Fund</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2012
Mailing Address 5050 W Tennessee Street			Amount of Each Disbursement this Period 324.00 <b>Transaction ID : D265142</b>
City Tallahassee	State FL	Zip Code 32399-0180	
Purpose of Disbursement Payroll taxes		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. Franklin Davis Printing</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 520 North Willow Avenue			Amount of Each Disbursement this Period 4793.31 <b>Transaction ID : D265150</b>
City Tampa	State FL	Zip Code 33606	
Purpose of Disbursement Printing & mailing		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5617.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Golden Rule Insurance</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2012
Mailing Address 7440 Woodland Drive			Amount of Each Disbursement this Period 140.14 <b>Transaction ID : D265135</b>
City Indianapolis	State IN	Zip Code 46278	
Purpose of Disbursement Employee benefit	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Golden Rule Insurance</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2012
Mailing Address 7440 Woodland Drive			Amount of Each Disbursement this Period 140.14 <b>Transaction ID : D265136</b>
City Indianapolis	State IN	Zip Code 46278	
Purpose of Disbursement Employee benefit	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Golden Rule Insurance</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 7440 Woodland Drive			Amount of Each Disbursement this Period 140.14 <b>Transaction ID : D269758</b>
City Indianapolis	State IN	Zip Code 46278	
Purpose of Disbursement Employee benefit	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	420.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 77		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 2268.50 <b>Transaction ID : D269766</b>
City Tampa State FL Zip Code 33606	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 2268.50 <b>Transaction ID : D269767</b>
City Tampa State FL Zip Code 33606	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 2268.50 <b>Transaction ID : D265153</b>
City Tampa State FL Zip Code 33606	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6805.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 2268.50
City Tampa	State FL Zip Code 33606	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : <b>D265154</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 2268.50
City Tampa	State FL Zip Code 33606	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : <b>D267786</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 2268.50
City Tampa	State FL Zip Code 33606	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : <b>D267779</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6805.50
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 1245.25 <b>Transaction ID : D267780</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 59.23 <b>Transaction ID : D267782</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Exp reimb-copies & postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 1245.25 <b>Transaction ID : D267787</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2549.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 77			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Meghan Eileen Meehan-Draper</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012		
Mailing Address 3627 Dexter Drive			Amount of Each Disbursement this Period 1245.25		
City Tallahassee	State FL	Zip Code 32312	Transaction ID : D265155		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Meghan Eileen Meehan-Draper</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012		
Mailing Address 3627 Dexter Drive			Amount of Each Disbursement this Period 1245.25		
City Tallahassee	State FL	Zip Code 32312	Transaction ID : D265156		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Meghan Eileen Meehan-Draper</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2012		
Mailing Address 3627 Dexter Drive			Amount of Each Disbursement this Period 79.38		
City Tallahassee	State FL	Zip Code 32312	Transaction ID : D265157		
Purpose of Disbursement Exp Reimb-mileage & tolls		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2569.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 1245.25 <b>Transaction ID : D269768</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 1245.25 <b>Transaction ID : D269770</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 8.03 <b>Transaction ID : D269773</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Exp reimb - copies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2498.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2012</b>
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period <b>24.60</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Exp reimb-office supplies	<b>Transaction ID : D269774</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2012</b>
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period <b>37.41</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Exp reimb - mileage & tolls	<b>Transaction ID : D269775</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 29 / 2012</b>
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period <b>356.03</b>
City Tallahassee	State FL	
Zip Code 32312	Purpose of Disbursement Exp reimb - mileage	<b>Transaction ID : D269776</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>418.04</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Meghan Eileen Meehan-Draper</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 3627 Dexter Drive		Amount of Each Disbursement this Period 230.52 <b>Transaction ID : D269743</b>
City Tallahassee	State FL Zip Code 32312	
Purpose of Disbursement Exp Reimb-Postage & copies	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2012
Mailing Address 1101 15th Street NW		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : D265139</b>
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Data, website, support, email	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address 1101 15th Street NW		Amount of Each Disbursement this Period 3550.00 <b>Transaction ID : D265140</b>
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Website redesign	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6480.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 211 North Dale Mabry Highway		Amount of Each Disbursement this Period 86.63
City Tampa	State FL Zip Code 33609	
Purpose of Disbursement Office supplies	Candidate Name	Transaction ID : D269763
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Philadelphia Phillies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address One Citizens Bank Way		Amount of Each Disbursement this Period 189.00
City Philadelphia	State PA Zip Code 19148	
Purpose of Disbursement Fundraising event-spring training tickets	Candidate Name	Transaction ID : D267776
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Philadelphia Phillies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2012
Mailing Address One Citizens Bank Way		Amount of Each Disbursement this Period 127.00
City Philadelphia	State PA Zip Code 19148	
Purpose of Disbursement Fundraising event-spring training tickets	Candidate Name	Transaction ID : D267777
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	402.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 77		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Public Storage</b>		M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address 5014 S Dale Mabry Highway		Amount of Each Disbursement this Period
City Tampa State FL Zip Code 33611		216.60
Purpose of Disbursement Storage		Transaction ID : D269755
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Renaissance Boca Raton Hotel</b>		M M / D D / Y Y Y Y 03 / 25 / 2012
Mailing Address 2000 NW 19th Street		Amount of Each Disbursement this Period
City Boca Raton State FL Zip Code 33431		462.87
Purpose of Disbursement Travel - hotel		Transaction ID : D270579
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. StubHub</b>		M M / D D / Y Y Y Y 02 / 10 / 2012
Mailing Address 199 Fremont St, Floor 4		Amount of Each Disbursement this Period
City San Francisco State CA Zip Code 94105		335.45
Purpose of Disbursement Fundraising event-spring training tickets		Transaction ID : D267778
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1014.92
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. T-Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2012
Mailing Address P.O. Box 660252		Amount of Each Disbursement this Period 111.40 <b>Transaction ID : D267784</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. T-Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2012
Mailing Address P.O. Box 660252		Amount of Each Disbursement this Period 111.40 <b>Transaction ID : D265148</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. T-Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2012
Mailing Address P.O. Box 660252		Amount of Each Disbursement this Period 111.40 <b>Transaction ID : D269765</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	334.20
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial)  
**A. Tampa Organization of Black Affairs**

Mailing Address P.O. Box 3485

City Tampa State FL Zip Code 33601

Purpose of Disbursement MLK Jr Celebration

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 12 / 2012

Amount of Each Disbursement this Period: 500.00

Transaction ID : D265146

Full Name (Last, First, Middle Initial)  
**B. The UPS Store #3751**

Mailing Address 301 West Platt Street

City Tampa State FL Zip Code 33606

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2012

Amount of Each Disbursement this Period: 200.00

Transaction ID : D265141

Full Name (Last, First, Middle Initial)  
**C. United States Postal Service**

Mailing Address 5201 West Spruce Street

City Tampa State FL Zip Code 33630

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 03 / 14 / 2012

Amount of Each Disbursement this Period: 872.35

Transaction ID : D269762

**SUBTOTAL** of Disbursements This Page (optional) ..... 1572.35

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 1500 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 233.00 <b>Transaction ID : D269749</b>
City Washington State DC Zip Code 20220	Purpose of Disbursement 1120-POL taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2012
Mailing Address 1500 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 2661.00 <b>Transaction ID : D269751</b>
City Washington State DC Zip Code 20220	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2012
Mailing Address 1500 Pennsylvania Avenue, NW		Amount of Each Disbursement this Period 4009.50 <b>Transaction ID : D265143</b>
City Washington State DC Zip Code 20220	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6903.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 77			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

**A. US Treasury**

Full Name (Last, First, Middle Initial)  
Mailing Address 1500 Pennsylvania Avenue, NW

City Washington State DC Zip Code 20220

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2012

Amount of Each Disbursement this Period: 129.00

Transaction ID : D265144

**B. US Treasury**

Full Name (Last, First, Middle Initial)  
Mailing Address 1500 Pennsylvania Avenue, NW

City Washington State DC Zip Code 20220

Purpose of Disbursement Payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 15 / 2012

Amount of Each Disbursement this Period: 1330.50

Transaction ID : D265145

**c. Kevin Karpay**

Full Name (Last, First, Middle Initial)  
Mailing Address 715 S Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement Reimburse-travel/airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 05 / 2012

Amount of Each Disbursement this Period: 391.40

Transaction ID : D265133

**SUBTOTAL** of Disbursements This Page (optional) ..... 1850.90

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2012
Mailing Address P.O. Box 1501		Amount of Each Disbursement this Period 391.40
City Winston Salem	State NC	
Zip Code 27102	Purpose of Disbursement Travel/airfare	Transaction ID : D265134
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 432.48
City Tampa	State FL	
Zip Code 33606	Purpose of Disbursement Reimburse-car rental	Transaction ID : D265151
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hertz</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 5503 W Spruce Street		Amount of Each Disbursement this Period 432.48
City Tampa	State FL	
Zip Code 33607	Purpose of Disbursement Car rental	Transaction ID : D265152
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	432.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 77	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Castor for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kevin Karpay</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 715 S Boulevard		Amount of Each Disbursement this Period 501.60
City Tampa	State FL Zip Code 33606	
Purpose of Disbursement Exp Reimb-travel/airfare (memo'd)		<b>Transaction ID : D267790</b>
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address P.O. Box 1501		Amount of Each Disbursement this Period 501.60
City Winston Salem	State NC Zip Code 27102	
Purpose of Disbursement Travel - airfare		<b>Transaction ID : D267791</b>
Candidate Name		
Office Sought:	Disbursement For: 2012	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought:	Disbursement For:	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	501.60
<b>TOTAL</b> This Period (last page this line number only).....	55659.89