

20020112514

SECRETARY OF THE SENATE

00 APR 17 AM 11:05

H. D.

Nelson
for U.S. Senate

Fundraising Highlights

1/1/00 – 3/31/00

- **The Nelson Campaign raised nearly \$1 million this quarter.**
- **The campaign has raised a total \$3.1 million as of March 31st from 6,400 contributors.**
- **The Nelson campaign has \$2.56 million cash on hand. We lead both of our Republican rivals in cash on hand.**
- **83% of the funds raised this period were given by individuals.**
- **Our end of year report revealed 81% of the funds were raised from Floridians.**
- **The Nelson campaign continues to spend money wisely, having spent only \$199,195 for the latest reporting period.**
- **Total expenditures for the campaign to date are only \$498,472. This represents only 16% of our total money raised for the campaign.**
- **In comparison our nearest Republican rival has spent \$1.6 million already, or 50% of the money he has raised since declaring his candidacy.**

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE

1. NAME OF COMMITTEE (in full)

Bill Nelson for U.S. Senate Campaign Committee

00 APR 17 AM 11:05

ADDRESS (number and street) ☐ Check if different than previously reported.
P.O. Box 10962

2. FEC IDENTIFICATION NUMBER
C00344051

CITY, STATE and ZIP CODE STATE/DISTRICT
Tallahassee, FL 32302 FL

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

- ☒ April 15 Quarterly Report ☐ Twelfth day report preceding _____ (Type of Election)
☐ July 15 Quarterly Report election on _____ in the State of _____
☐ October 15 Quarterly Report ☐ Thirtieth day report following the General Election on _____
☐ January 31 Year End Report _____ in the State of _____
☐ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination Report

This report contains activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
01/01/2000 through 03/31/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	937,693.38	2,999,581.53
(b) Total Contribution Refunds (From Line 20(d))	600.00	23,800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	937,093.38	2,975,781.53
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	199,895.33	512,769.86
(b) Total Offsets to Operating Expenditures (from Line 14)	699.50	14,297.23
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	199,195.83	498,472.63
8. Cash on Hand at Close of Reporting Period (from Line 27)	2,568,523.81	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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
Peggy Gagnon

Signature of Treasurer

Date
4-12-00

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

FEC FORM 3
(Revised 4/87)

20020112516
Detailed Summary Page
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Bill Nelson for U.S. Senate Campaign Committee		Report Covering the Period: From: 01/01/2000 To: 03/31/2000	
I. RECEIPTS		Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (Use Schedule A)		699,125.90	
(ii) Unitemized		81,289.67	
(iii) Total of contributions from individual		780,415.57	2,527,948.46
(b) Political Party Committees			16,500.00
(c) Other Political Committees (such as PACs)		157,277.81	455,133.07
(d) The Candidate			
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))		937,693.38	2,999,581.53
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		8,000.00	63,000.00
13. LOANS:			
(a) Made or Guaranteed by the Candidate			
(b) All Other Loans			
(c) TOTAL LOANS (add 13(a) and (b))			
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		699.50	14,297.23
15. OTHER RECEIPTS (Dividends, Interest, etc.)		18,617.30	30,214.91
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		965,010.18	3,107,093.67
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		199,895.33	512,769.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			2,000.00
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			
(b) Of All Other Loans			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		600.00	23,800.00
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		600.00	23,800.00
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		200,495.33	538,569.86
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD			1,804,008.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)			965,010.18
25. SUBTOTAL (add Line 23 and Line 24)			2,769,019.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)			200,495.33
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)			2,568,523.81

SCHEDULE A

ITEMIZED RECEIPTS

2002

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

PAGE 1 OF 157
FOR LINE NUMBER 11(a)(i)

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)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Mark Abbott 2665 S. Bayshore Dr. Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Trivest, Inc. Occupation Equities Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Richard Abedon 1015 Spanish River Drive #204 Boca Raton, FL 33432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code S. Daniel Abraham 777 South Flagler Dr. West Tower, 15th Floor West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Albert Abramson 11501 Huff Court Kensington, MD 20895- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Ruth Abramson 305 Everglade Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Ruth Abramson 305 Everglade Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Robert Ader 100 S.E. 2nd St. Ste. 3550 Miami, FL 33130- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002042540

 This is Schedule A of the
 Detailed Summary Page

 PAGE 2 OF 157
 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Warren Adler 45 Huckleberry Dr. Jackson, WY 83001-9391 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Novelist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code David Akins 4032 Lake Underhill Road, Apt T Orlando, FL 32803 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight LLP Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Greg Alexander 59 Sundown Dr. Jackson, TN 38305- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Pamela Allen 9222 Charles E. Limpus Rd. Orlando, FL 32836- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Armando Alonso 3040 NW Gainesville Rd. Ocala, FL 34475-4300 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer County Line RV Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Armando Alonso 3040 NW Gainesville Rd. Ocala, FL 34475-4300 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer County Line RV Occupation Owner Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Francisco Alonso 3040 NW Gainesville Rd. Ocala, FL 34475-4300 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer County Line RV Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412549	File separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 157
	FOR LINE NUMBER 11(a)(i)	

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Francisco Alonso 3040 NW Gainesville Rd. Ocala, FL 34475-4300 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer County Line RV Occupation Owner Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 1,500.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Sharon Alpert c/o Aviation Systems International, Inc. P.O. Box 3020 Boca Raton, FL 33431- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 01/31/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Happy Alter 2800 Paddock Rd. Fort Lauderdale, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bob's Barricades Occupation President Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code David E. Altschul 17160 McCormick St. Encino, CA 91316 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Warner Bros. Records Inc. Occupation Vice Chairman/general Counsel Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00 Earmarked Move On
E. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn, Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) Aggregate Year-to-Date ->	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Michael Ambrosio 1024 NW 99th Avenue Fort Lauderdale, FL 33322- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Simkins Industries Occupation Real estate Date (month, day, year) 03/28/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Erika Anderson 401 E. Jackson St., Ste. 2400 Tampa, FL 33602- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Interior Designer Date (month, day, year) 03/27/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412520

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

PAGE 4 OF 157

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Timothy Anderson 4507 Brookwood Drive Tampa, FL 33629- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Timothy Anderson, P.A. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Karen Andreas 617 Fifth St. Merritt Island, FL 32953- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Graduate Student Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code John Angelini 2425 Bercelona Dr. Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Angelini Drilling Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Gary Appel 1717 N. Bayshore Dr., Apt. 3057 Miami, FL 33132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bates-Appel, Inc. Occupation Tax Consulting Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Susan Arkin 350 White Oak Circle Maitland, FL 32751 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Harry Armon 307 E. Shore Rd. Great Neck, NY 11023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer IMREX Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Rosemary Armstrong 3415 W. Mullen Avenue Tampa, FL 33609- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Zuckerman, Spaeder Taylor etal Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012524

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

PAGE 5 OF 157
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Larry Arnowitz 2310 NW 103rd Avenue Hollywood, FL 33026- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Larry Arnowitz 2310 NW 103rd Avenue Hollywood, FL 33026- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Tod Aronovitz Museum Tower, Suite 2700 150 W. Flagler St. Miami, FL 33130- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Aronovitz & Associates Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Norman Asher 1135 Gulf of Mexico Dr., #404 Longboat Key, FL 34228- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Darla Atkins 49 Marina Isles Blvd. Indian Harbour Beach, FL 32937 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 350.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 350.00
F. Full Name, Mailing Address and Zip Code Kathleen Atkins P.O. Box 15948 Tallahassee, FL 32317- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Atkins Management Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Jerome Atkinson 112 Eagle Rock Way Montclair, NJ 07042-1630 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fortis, Inc. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412522

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

PAGE 6 OF 157
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Joseph Atterbury 5393 Pennock Point Road Jupiter, FL 33458- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Atterbury Goldberger Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Gregory Avis 1545 Waverley St. Palo Alto, CA 94301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Summitt Partners Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Alan Axelrod 20900 NE 21st Ct. North Miami, FL 33179- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bilzin, Sumberg et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Theodore Babbitt P.O. Box 024426 West Palm Beach, FL 33402- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Babbitt Johnson Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code James Bacchus 750 Via Lomdardy Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code James Bacchus 750 Via Lomdardy Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Leland Baggett 11061 NW 29th Street Coral Springs, FL 33065 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State Farm Insurance Occupation Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412520

Use this schedule(s) and category of the Detailed Summary Page

PAGE 7 OF 157
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Ginger Baker 11601 NW 4 Street Fort Lauderdale, FL 33325- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sawgrass Recreational Park Occupation Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Vicki Balint 5516 E. Arcadia Lane Phoenix, AZ 85018-3116 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Myrna Band 400 Flamingo Ave. Sarasota, FL 34242- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Charles Barger P.O. Box 361817 Melbourne, FL 32936-1817 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Mary Barley Box 1915 Islamorada, FL 33036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Everglades Foundation Inc. Occupation Environmentalist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/20/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Leslie Barnett Post Office Box 3287 Tampa, FL 33601- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Barnett, Bolt, Kirkwool & Long Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code F. Gregory Barnhart 236 Miraflores Dr. Palm Beach, FL 33480 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denny Scarola et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112524

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 8 OF 157
FOR LINE NUMBER
11(a)(i)

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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Marjorie Bartok 3825 Macfarlane St. Melbourne Beach, FL 32951-3140 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and Zip Code Dennis Bassford 1009 North 33 Place Renton, WA 98056- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Moneytree, Inc. Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Donna Bateman 423 Shantilly Terrace Tallahassee, FL 32312 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Fredrick Bateman PO Box 1454 Tallahassee, FL 32302-1454 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Foley & Lardner Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Christopher Bates 2724 NE 15th St., #4 Fort Lauderdale, FL 33304- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bates-Appel, Inc. Occupation Tax Consulting Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Margaret Bates 700 John Ringling Blvd., #N-303 Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Scott Baughan 409 Rockledge Dr. Rockledge, FL 32955-2451 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Johnson & Baughan, PA Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112525	Page schedule(s) for category of the Detailed Summary Page	PAGE 9 OF 157
	FOR LINE NUMBER 11(a)(i)	

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)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Frank Baxter 519 Ocampo Dr. Pacific Palisades, CA 90272- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jefferies & Co. Occupation Chairman Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Michael Bayer 1140 Brookwood Rd. Jacksonville, FL 32207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Joe Company Occupation Human Resources VP Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Belle Bear 72 Highpoint Drive Gulf Breeze, FL 32561- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Dana Beavan 102 Riverside Dr., #305 Cocoa, FL 32922 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Dana Beavan 102 Riverside Dr., #305 Cocoa, FL 32922 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Steven Bechtel 1500 Via Tuscany Winter Park, FL 32789-2658 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mateer & Harbert, P.A. Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Eric Beck 3336 Old Oak Lane Hollywood, FL 33021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kelco Management & Development Occupation Real estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/11/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112526	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 10 OF 157
		FOR LINE NUMBER 11(a)(i)

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)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michael Beckerman 2698 NW 41st St. Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Merrill Lynch Occupation Broker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Elinor Belfer 120 Sunset Ave., #3C Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real Estate Developer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Douglas Bell 800 E. Broward Blvd., #601 Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Samuel Bell 1298 Millstream Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pennington Law Firm Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Samuel Bell 1298 Millstream Tallahassee, FL 32312- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pennington Law Firm Occupation Attorney Aggregate Year-to-Date -> 1,250.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code David Benjamin Fort Lauderdale, FL 33304- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Environmental Design Occupation Architect Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Florida 2000 Amount of Each Receipt this Period 1,000.00 MEMO
G. Full Name, Mailing Address and Zip Code David Benjamin Fort Lauderdale, FL 33304- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Environmental Design Occupation Architect Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/29/2000 Florida 2000 Amount of Each Receipt this Period 1,000.00 MEMO

SUBTOTAL of Receipts This Page (optional)	2,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020412527 Attach schedule(s) for this category of the Detailed Summary Page	PAGE 11 OF 157
	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Gilbert Bennett 8185 Strasburg Rd. Pensacola, FL 32514 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Insurance Date (month, day, year) 03/29/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code William Berger 1200 N. Federal Highway, Suite 200 Boca Raton, FL 33432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Date (month, day, year) 03/01/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Cindy Bergeron 21111 SW 16th St. Fort Lauderdale, FL 33332- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Lonnie Bergeron 1715 St. Tropez Court Kissimmee, FL 34744- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bergeron Land Development Occupation Developer Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Ronald Bergeron 19612 SW 69th Place Fort Lauderdale, FL 33332 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bergerson Land Development Occupation Developer Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Ronald Bergeron 18092 SW 12th Bourt Pembroke Pines, FL 33029- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bergeron Land Development Occupation Developer Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Robert Bergin 324 Sandal Lane Palm Beach Shores, FL 33404 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Date (month, day, year) 02/17/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112520	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 12 OF 157
		FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Carla Berkowitz One SE Third Avenue 15th Floor Miami, FL 33131- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accounting Date (month, day, year) 01/11/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Jerome Berlin 4000 Island Blvd., Suite 1704 Aventura, FL 33160- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Date (month, day, year) 01/25/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Allison Berman 390 Booth Ave. Englewood, NJ 07631- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Student Date (month, day, year) 02/22/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Lori Berman Mr. Jeffrey Ganeles, DMD 2365 NW 46th Street Boca Raton, FL 33431- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Mandell Berman 29100 Northwestern Hwy., Ste 370 Southfield, MI 48034-1056 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer MLB Investments Occupation Investor Date (month, day, year) 02/28/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Mark Berman 390 Booth Ave. Englewood, NJ 07631- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Student Date (month, day, year) 02/22/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Neil Berman 146 W. Sunrise Avenue Coral Gables, FL 33133 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berman Wolfe & Rennert Occupation Attorney Date (month, day, year) 02/17/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002 142529	Use date schedule(s) for category of the Detailed Summary Page	PAGE 13 OF 157
		FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Berl Bernhard 901 - 15th St., NW, #700 Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Verner, Liipfert, Bernhard, et Occupation Attorney Date (month, day, year) 03/22/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Lawrence Bernhardt 20320 Fairway Oaks Dr., Apt 343 Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Date (month, day, year) 03/01/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Jules Bernstein 4915 Hillbrook Lane, NW Washington, DC 20016-3208 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bernstein & Lipsett Occupation Attorney Date (month, day, year) 03/20/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Michael Bernstein 100 Regent Park Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Shorewood Financial Occupation Attorney Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Ben Betts 2532 Marston Rd. Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Betts, Rogers, Scherek & Jones Occupation CPA Date (month, day, year) 03/06/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Maria Bick 15091 Featherstone Way Fort Lauderdale, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bick & Assoc Occupation Insurance Sales Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Howard Bienenfeld 600 Corporate Dr., #320 Fort Lauderdale, FL 33334- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112530 Indicate schedule(s) for category of the Detailed Summary Page	PAGE 14 OF 157
	FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Ruth Bierley 5414 Lykes Lane Tampa, FL 33611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Ruth Bierley 5414 Lykes Lane Tampa, FL 33611- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,250.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Stephen Bing 9700 W. Pico Blvd. Los Angeles, CA 90035- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Russell Blain 110 East Madison Street Suite 200 Tampa, FL 33602-2802 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sticher, Riedel, Blain et. al. Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Robert Blanchard 3017 Bat Street Gulf Breeze, FL 32561- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Myriam Blanco-Valdes 9970 SW 58th Street Miami, FL 33173- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Myriam Blanco-Valdes 9970 SW 58th Street Miami, FL 33173- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002

112531
Use appropriate schedule(s)
for category of the
Detailed Summary Page

PAGE 15 OF 157
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Alan Bleznak 960 North Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Lawrence Block 2139 Palm Beach Lakes Blvd. West Palm Beach, FL 33409 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Russell Bohn 8839 Indian River Run Boynton Beach, FL 33437-2445 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Caruso Burlington Bohn Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Mark Boland 911 Park Ave., North Winter Park, FL 32789-2535 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Mark Boland 911 Park Ave., North Winter Park, FL 32789-2535 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Alfred Bonati 7315 Hudson Avenue Hudson, FL 34667- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Don Bonker 4774 N. Old Dominion Dr. Arlington, VA 22207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Int. Mgmt & Dev. Institute Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112532 Date schedule(s) for category of the Detailed Summary Page	PAGE 16 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Rainy Booth 4060 Ashmore Place Pensacola, FL 32503- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kinsey Traxel Johnson Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Peter Borer 8520 4th St., North Saint Petersburg, FL 33702- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Payday Now Occupation Financial Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Ron Borstein 220 Corporate Blvd Boca Raton, FL 33433- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Electric Capital Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Welby Boughton 33873 S. Banana River Blvd. Cocoa Beach, FL 32931-4189 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Computers Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Bruce Bowman 4921 Ballygar Dr. Tallahassee, FL 32308- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dennis & Bowman, P.A. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Lisa Bowman 4921 Ballygar Dr. Tallahassee, FL 32308 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Lisa Bowman 4921 Ballygar Dr. Tallahassee, FL 32308 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,250.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	4,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112500	Is this schedule(s) for a category of the Detailed Summary Page	PAGE 17 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Lisa Bowman 4921 Ballygar Dr. Tallahassee, FL 32308 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/22/2000 Aggregate Year-to-Date -> 1,500.00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Katharine Boyce 106 West Rosemont Ave. Alexandria, VA 22301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Patton Boggs LLP Occupation Attorney Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Wesley Boyd 1141 Walnut Street Berkeley, CA 94707 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Software Developer Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 950.00	Amount of Each Receipt this Period 950.00 Earmarked Move On
D. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) Aggregate Year-to-Date ->	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Edward Bralower 46 Lakewood Dr. Stamford, CT 06903- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jefferies & Co. Occupation Stockbroker Date (month, day, year) 02/22/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Harry Brandon 778 Loggerhead Island Dr. Satellite Beach, FL 32937- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Date (month, day, year) 03/10/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Patrice Brandt 2000 S. Bayshore Dr., Villa 39 Coconut Grove, FL 33133-3251 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/13/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 18 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Patrice Brandt 2000 S. Bayshore Dr., Villa 39 Coconut Grove, FL 33133-3251 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code William Brandt 2000 S. Bayshore Dr., Villa 39 Coconut Grove, FL 33133-3251 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code William Brandt 2000 S. Bayshore Dr., Villa 39 Coconut Grove, FL 33133-3251 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Barry Brant One SE Third Ave., 15th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accountant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Amy Share Brennan 12001 Nw 10th Street Fort Lauderdale, FL 33323- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Thomas Brennan 225 Aragon Ave.. Coral Gables, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Apartment Owner Aggregate Year-to-Date -> 350.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 350.00
G. Full Name, Mailing Address and Zip Code David Brodie 9081 NW 14th St. Plantation, FL 33322- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer SAV-Audio Visual Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412585

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

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Margaret Broussard 3660 North Riverside Dr. Indialantic, FL 32903- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code William Broussard 3660 N. Riverside Dr. Indialantic, FL 32903 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Melbourne Eye Associates Occupation Physician Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Irwin Browarsky 14024 Lake Bluff Tampa, FL 33624- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ruffolo Hooper Associates Occupation Pathology Physician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code David Brown 5901 SW 74th St., Suite 205 South Miami, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code James Brown 4466 McIntish Park Drive Number 1404 Sarasota, FL 34232- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Lewis Brown 473 Ridge Rd. Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gilbride Heller & Brown Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Paul Brown 1744 South Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Rory Brown 13345 Rolling Green Rd. North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer VirtualBank Occupation Chairman Date (month, day, year) 03/06/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Shirley Brown 4734 Country Manor Dr. Sarasota, FL 34233- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of Florida Occupation Legislator Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 866.00	Amount of Each Receipt this Period 866.00 Event Expense IN-KIND
C. Full Name, Mailing Address and Zip Code Jackson Brownlee 909 Wald Rd. Orlando, FL 32806-6350 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Date (month, day, year) 03/15/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code John Buchanan 6946 Standing Pines Lane Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Henry, Buchanan, Hudson, Suber Occupation Attorney Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 300.00	Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and Zip Code Susie Buell Three Embarcadero Ctr. Suite # 2290 San Francisco, CA 94111- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Esprit Occupation Ceo Esprit Date (month, day, year) 01/20/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Philip Burlington 4 Wycliff Rd. West Palm Beach, FL 33418- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Caruso Burlington Bohn Occupation Attorney Date (month, day, year) 02/17/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code John Burns 420 22nd St. North Saint Petersburg, FL 33713- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer A.G. Edwards & Sons, Inc. Occupation President Date (month, day, year) 02/11/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,916.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412537

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code William Burton 70 Pine Street New York, NY 10270- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer D'Amato & Lynch Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Partnership -> D'Amato & Lynch MEMO	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code William Burton 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer D'Amato & Lynch Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Partnership	Amount of Each Receipt this Period 500.00 MEMO
E. Full Name, Mailing Address and Zip Code Cynthia Butler 4 Crooked Bridge Way Ormond Beach, FL 32174- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Cynthia Butler 4 Crooked Bridge Way Ormond Beach, FL 32174- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code David Butler 4 Crooked Bridge Way Ormond Beach, FL 32174- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Citadel Group Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112538

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Anne Buzby 512 Ponte Vedra Blvd. Ponte Vedra Beach, FL 32082 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00
B. Full Name, Mailing Address and Zip Code Edward Byrd 7425 Lake Drive Orlando, FL 32809-6828 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Edward T. Byrd & Company Occupation Mortgage Banker	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
C. Full Name, Mailing Address and Zip Code Julie Bytnar 610 Bunker Hill Naperville, IL 60540-7128 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
D. Full Name, Mailing Address and Zip Code Christine Cable 100 River Dr. Bay Ridge Annapolis, MD 21403- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Counselor	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
E. Full Name, Mailing Address and Zip Code Carolyn Cacciatore 8 Yacht Club Lane Indian Harbour Beach, FL 32937- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
F. Full Name, Mailing Address and Zip Code Carolyn Cacciatore 8 Yacht Club Lane Indian Harbour Beach, FL 32937- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,000.00
G. Full Name, Mailing Address and Zip Code Sammy Cacciatore 8 Yacht Club Lane Indian Harbour Beach, FL 32937- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nance, Cacciatore, Sisserson Occupation Attorney	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412599

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

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code P. Bruce Camacho P.O. Box 971519 Miami, FL 33197-1519 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assurant Group Occupation Marketing Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Jeanne Campbell 1010 Pennsylvania Ave. S.E. Washington, DC 20003-2142 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Campbell Crane & Assoc. Occupation CEO Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Gary Canner 10647 SW 76th Terrace Miami, FL 33173- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 350.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 350.00
D. Full Name, Mailing Address and Zip Code Irving Canner 20020 NE 22 Avenue Miami, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investments Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code David Cannold 525 S. Flagler Dr., Apt. P-1A West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Paul Carbery 400 N. Kenilworth Oak Park, IL 60302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Frontenac Company Occupation General Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/12/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Paul Carbery 400 N. Kenilworth Oak Park, IL 60302- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Frontenac Company Occupation General Partner Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/12/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112540

Use separate schedule(s)
for each category of the
receipts summary pagePAGE OF
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Sherry Carbery 400 N. Kenilworth Ave. Oak Park, IL 60302- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sinai Health First Occupation Physician Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/12/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Sherry Carbery 400 N. Kenilworth Ave. Oak Park, IL 60302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sinai Health First Occupation Physician Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/12/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Charles Carlan 3420 Oakmont Drive Pensacola, FL 32503- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carlan Killam Occupation Construction Engineer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Scott Carruthers 6500 Miccosukee Rd. Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Florida Trial Lawyers Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Steve Carter 7340 Miccosukee Rd. Tallahassee, FL 32308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Henry, Buchanan, Hudson, Suber Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and Zip Code Edna Caruso 247 Wells Road Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Caruso Burlington Bohn et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Kurt Cellar 192 East 75th St., #8A New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112544	Attach schedule(s) for each category of the Detailed Summary Page	PAGE 25 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Dorothy Chambers 621 C. Pointe Vedra Blvd. Ponte Vedra Beach, FL 32082-	Name of Employer Retired Occupation Retired	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Melissa Chaykin 324 E. Rivo Alto Drive Miami Beach, FL 33139-	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code Steven Chaykin 324 East Rivo Alto Drive Miami Beach, FL 33139	Name of Employer Korge & Powell, P.A. Occupation Attorney	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Stephen Cheeseman 101 E. Kennedy Boulevard Suite 4130 Tampa, FL 33602-	Name of Employer Cheeseman & Phillips Occupation Attorney	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Kerry Clayton 90 Druid Hill Rd. Summit, NJ 07901-	Name of Employer Fortis, Inc. Occupation President	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Peter Cochrane 5850 Orange Dr. Davie, FL 33314-	Name of Employer Semsco Occupation Sales Representative	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
G. Full Name, Mailing Address and Zip Code Bruce Cohen 105 Mosle Road Far Hills, NJ 07931-	Name of Employer Westgate Financial Occupation President	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)	5,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020412542

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Gary Cohen 21214 Sweetwater Lane. North Boca Raton, FL 33428- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Grossman & Roth Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Guy Colado 121 W. Kings Way Winter Park, FL 32789-5714 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer National Bank of Commerce Occupation Banker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Marcia Cole 1190 North Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Gilbert Colon 11875 SW 49th St. Miami, FL 33175-5601 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer SIG, Inc. Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Joseph Considine 301 Clematis St., Suite 200 West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Davis Whalen McHale Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Albert Conyers P.O. Box 3803 Sarasota, FL 34230- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Steven Cook 203 Fernwood Street Leesburg, FL 34748- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer American Assn. of Nurse Anesth Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/01/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112540 (If you file a separate schedule (a) for this category of the Detailed Summary Page)	PAGE 27 OF 157
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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Tommy Cooley P.O. Box 2222 Panama City, FL 32402-2222 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cooley Managment Occupation Banking Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Marvin Cooper 5000 N. Bay Road Miami Beach, FL 33140-2007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Ira Cor 7870 NW 11th Place Fort Lauderdale, FL 33322- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Joanne Corzine 25 Lenox Rd. Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Brian Costello RD 1 Box 3 Tuxedo Park, NY 10987-9709 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Palisade Capital Management Occupation Sr. Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code James Costello 1767 Sentry Parkway West Suite 300 Blue Bell, PA 19422-2 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Arthur Courshon 100 SE 2nd St., Suite 2800 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Zack Kosnitzky P.A. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Carol Courshon 100 SE 2nd St., Suite 2800 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Warren Coville 216 Bird Key Dr. Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/24/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Cynthia Cress 824 Peninsula Dr. Ormond Beach, FL 32176- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Doran & Wolfe Occupation Office Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Michael Criden 200 S. Biscayne Blvd. Miami, FL 33131- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hanzman Criden Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Michael Criden 200 S. Biscayne Blvd. Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hanzman Criden Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Robert Crippen 691 East 3550 North Ogden, UT 84414- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cordant Technoloies, Inc. Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Simon Cruz 433 E. Dilido Dr. Miami Beach, FL 33139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer City of Miami Beach Occupation Commissioner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002 112545

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Simon Cruz 433 E. Dilido Dr. Miami Beach, FL 33139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer City of Miami Beach Occupation Commissioner Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Bruce Culpepper 1117 Carriage Road Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Akerman and Associates Occupation Attorney Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 200.00
C. Full Name, Mailing Address and Zip Code Bruce Culpepper 1117 Carriage Road Tallahassee, FL 32312- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Akerman and Associates Occupation Attorney Aggregate Year-to-Date -> 1,200.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Virginia Culpepper 301 South Brounough St., Suite 200 Tallahassee, FL 32302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Virginia Culpepper 301 South Brounough St., Suite 200 Tallahassee, FL 32302- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,800.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 800.00
F. Full Name, Mailing Address and Zip Code Helen Cummings c/o Robin Rosenberg 283 Valencia Drive West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Fred Cunningham 143 Lighthouse Dr. North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412540	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 30 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Russell Currin 5922 Cattlemen Lane, Suite 204 Sarasota, FL 34232- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Alan Curtis 720 South Ocean Boulevard Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Eduardo Cusco 8200 SW 84th Terrace Miami, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code John D'Albora 4805 16th St. Vero Beach, FL 32966- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer J.D. Albora Company Occupation Agriculture Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/23/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Noretta D'Albora 939 Indian River Drive Cocoa, FL 32922 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code George D'Amato 70 Pine Street New York, NY 10270- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer D'Amato & Lynch Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00 Partnership -> D'Amato & Lynch MEMO
G. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year) Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112547

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
B. Full Name, Mailing Address and Zip Code George D'Amato 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer D'Amato & Lynch Occupation Attorney Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 Partnership -> D'Amato & Lynch	Amount of Each Receipt this Period 500.00 MEMO
C. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code D'Amato & Lynch 70 Pine Street New York, NY 10270- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Steven B. Dan 7311 S.W. 108 Terrace Pinecrest, FL 33156 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dan Consulting Services, Inc. Occupation Software Engineer Aggregate Year-to-Date ->	Date (month, day, year) 03/08/2000 Earmarked Move On	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley,CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) Aggregate Year-to-Date ->	Amount of Each Receipt this Period Aggregate Year-to-Date ->
B. Full Name, Mailing Address and Zip Code William Dannahower 809 S. Indian River Dr. Fort Pierce,FL 34950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 03/10/2000 Event Expense Aggregate Year-to-Date ->	Amount of Each Receipt this Period 214.53 IN-KIND Aggregate Year-to-Date ->
C. Full Name, Mailing Address and Zip Code William Dannahower 809 S. Indian River Dr. Fort Pierce,FL 34950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 03/23/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date ->
D. Full Name, Mailing Address and Zip Code Elizabeth Dauten 16 Country Lane Winnetka,IL 60093- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date ->	Date (month, day, year) 01/11/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date ->
E. Full Name, Mailing Address and Zip Code Elizabeth Dauten 16 Country Lane Winnetka,IL 60093- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date ->	Date (month, day, year) 01/11/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date ->
F. Full Name, Mailing Address and Zip Code Kent Dauten 16 Country Lane Winnetka,IL 60093- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Keystone Capital, Inc. Occupation President Aggregate Year-to-Date ->	Date (month, day, year) 01/11/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date ->
G. Full Name, Mailing Address and Zip Code Kent Dauten 16 Country Lane Winnetka,IL 60093- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Keystone Capital, Inc. Occupation President Aggregate Year-to-Date ->	Date (month, day, year) 01/11/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date ->

SUBTOTAL of Receipts This Page (optional)

4,714.53

TOTAL This Period (last page this line number only)

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20020112549

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Richard David 350 S. Hollybrook Terrace Hollywood, FL 33025- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Richard David 350 S. Hollybrook Terrace Hollywood, FL 33025- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Joseph Davidson 130 Sunrise Ave., Apt 202W Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Bradley Davis 410 Somerset Indianapolis, IN 46260- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Davis Properties Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Joseph Davis 12925 SW 100th Avenue Miami, FL 33176- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Markowitz Davis Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Leonard Davis 120 Casa Bendita Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Paige Davis 7301 Ritchie Highway, Suite 800 Glen Burnie, MD 21061- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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to this category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Sophie Davis 120 Casa Bendita Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Armanda De Cespedes 7125 East Lago Drive Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Palm Avenue Insurance Agency Occupation Agent Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Armanda De Cespedes 7125 East Lago Drive Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Palm Avenue Insurance Agency Occupation Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Raul De Cespedes 7125 East Lago Drive Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Continuum Medical Care Occupation CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Raul De Cespedes 7125 East Lago Drive Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Continuum Medical Care Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Kim De La Parte 3019 Villa Rosa Tampa, FL 33611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Armando De Moya 12209 S. Dixie Hwy Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The De Moya Group Occupation civil engineer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Allen De Olazarra 11090 Snapper Creek Rd. Coral Gables, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer ACP Real Estate Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/28/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Donald DeCarlo 200 Manor Road Douglaston, NY 11363-1130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lord, Bissell & Brook Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code George DePontis 780 NE 69th St. Miami, FL 33138-5743 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code William Decker 1035 Riverside Trace Atlanta, GA 30328- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Laurence Deets 1435 Palencia Ave. Miami, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Butler, Buckley, Deets Occupation Chief Financial Officer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Gene Della Piana 2755 NE 28th Ave., #D2 Lighthouse Point, FL 33064- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ferguson Enterprises Occupation Construction Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Vicki Denhoffer 3680 Potomac Place Boynton Beach, FL 33436- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jefferson Pilot Securities Cor Occupation Member of Company Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Earl Denney 2127 Regents Boulevard West Palm Beach, FL 33409- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarola et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Earl Denney 2127 Regents Boulevard West Palm Beach, FL 33409- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarola et al Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Craig Dennis PO Box 15589 Tallahassee, FL 32317- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dennis & Bowman, P.A. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Janet Dennis 6335 Proctor Rd. Tallahassee, FL 32308 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Janet Dennis 6335 Proctor Rd. Tallahassee, FL 32308 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Janet Dennis 6335 Proctor Rd. Tallahassee, FL 32308 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Dale Dettmer 8065 S Tropical Trl. Merritt Island, FL 32952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Krasny & Dettmer Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/14/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jeffrey Deutch 4550 NW 24th Terr Boca Raton, FL 33431- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Barbara Devane 1035 Lakeview Dr. Winter Park, FL 32789-5035 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Paul DiMare Post Office Box 900460 Homestead, FL 33090-0460 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DiMare, Co. Occupation Agriculture Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Paul DiMare Post Office Box 900460 Homestead, FL 33090-0460 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer DiMare, Co. Occupation Agriculture Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Terry Diamond One N. Franklin St., Suite 450 Chicago, IL 60606- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Talon Asset Management Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Salvador Diaz-Verson 1200 Brookstone Center Parkway Suite 105 Columbus, GA 31904- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Diaz-Verson Capital Investment Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Zena Dickstein 80 W. Rivo Alto Dr. Miami Beach, FL 33139 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Steel Hector & Davis Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

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20020412554

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Robert Diffenderfer 506 27th St. West Palm Beach, FL 33407-5420 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lewis Long Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Andrew Diloreto 9 Spicewood Lane Wilton, CT 06897- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Andrew Diloreto 9 Spicewood Lane Wilton, CT 06897- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Alan Dimond 7420 SW 49 Court Miami, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code David Dittmar 3250 Mary St., Ste. 400 Coconut Grove, FL 33133 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dittmer & Hauser, PA Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Lissette Dittmar 13471 SW 72nd Avenue Miami, FL 33156 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Judy Dobin One Bay Colony Lane Fort Lauderdale, FL 33308-2003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Valley Forge Fabrics Occupation Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,750.00

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code John Dohm 1100 SE Third Avenue Second Floor Fort Lauderdale, FL 33316- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Halliday Group Occupation Real estate Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code Jorge Dominicus 340 Royal Poinciana Way Suite 316 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Florida Crystals Occupation VP of Corporate Relations Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Sean Domnick 6651 Audubon Trace West West Palm Beach, FL 33412- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Terrence Donati 933 Willow Lane Sleepy Hollow, IL 60118- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Ava Doppelt 851 Mayfield Ave. Winter Park, FL 32789-2610 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Allen, Dyer et al Occupation Attorney Aggregate Year-to-Date -> 150.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 150.00
F. Full Name, Mailing Address and Zip Code Theodore Doran PO Box 1231 Daytona Beach, FL 32115 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Doran & Wolfe Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Linda Doumar 22 S. Victoria Park Rd. Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employed Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jack Dover 309 Rucker Place Alexandria, VA 22301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Griffin, Johnson, & Dover Occupation Government Affairs Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Ann Downey 525 Andros Lane Indian Harbour Beac, FL 32937- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Mary Dreksler 295 Highway A1A, #301 Satellite Beach, FL 32937- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Jack Dresner 10241 SW 133rd St. Miami, FL 33176- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation CPA Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Stephen Dresnick 6855 S. Red Road Suite 400 Coral Gables, FL 33143 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Hospital Occupation Physician Aggregate Year-to-Date -> 216.88	Date (month, day, year) 02/10/2000 Amount of Each Receipt this Period 216.88 IN-KIND
F. Full Name, Mailing Address and Zip Code Stephen Dresnick 6855 S. Red Road Suite 400 Coral Gables, FL 33143 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Hospital Occupation Physician Aggregate Year-to-Date -> 1,216.88	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Samuel Dubbin 14000 SW 104th Avenue Miami, FL 33176 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dubbin & Krauetz Occupation Lawyer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2,416.88

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SCHEDULE A

ITEMIZED RECEIPTS

2002

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Lawrence Dubow 9428 Baymeadows Rd., Suite 250 Jacksonville, FL 32256- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer HMS Sales Company Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Bethany Duggins 212 Country Club Dr. Greensboro, NC 27408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wrangler Occupation Marketing Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Frederick Dunbar 18 Village Lane Bronxville, NY 10708- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer NERA Occupation Economist Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Kurt Dunkle 4823 Apache Avenue Jacksonville, FL 32210 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Michael Dyer 1110 South Pearl Street Deland, FL 32720- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Doran & Wolfe Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Kevin Dykstra 15015 S. 20th Place Phoenix, AZ 85048- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bonnett, Fairbourne et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Stephen Echsner 23 North Sunset Blvd. Gulf Breeze, FL 32561- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012550

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Martha Edenfield 3682 Bobbin Brook Cir. P.O. Box 10095 Tallahassee, FL 32312 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pennington, Moore, Wilkinson Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code William Edington 1202 Essex Manor Ct. Alexandria, VA 22308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Edington Pell & Associates Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Charles Edwards 14581 Headwater Bay Lane Fort Myers, FL 33908- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Annis, Mitchell, Cockey, etc. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Lois Edwards 3429 Winding Oaks Dr. Longboat Key, FL 34228- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/07/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Erika Eichenberger 1194 Breakers West Blvd. West Palm Beach, FL 33411- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code James Eisenberg 194 Almeria Road West Palm Beach, FL 33405- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Cynthia Eisenmenger 4405 Crooked Mile Rd. Merritt Island, FL 32952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Florida Today Occupation Writer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

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20020412559

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

NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Steven Elias 1 Grove Isle Dr., #1807 Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Charles Ely 1847 Montgomery Place Jacksonville, FL 32205- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sanford Law Firm Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Marc D. Emory 5933 St. Andrews Drive Dallas, TX 75205 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Heritage Capital Corporation Occupation Numismatist Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/22/2000 Earmarked Move On	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Heinz Eppler 150 North Ocean Blvd., PH2 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code June Epstein-David 350 S. Hollybrook Terrace Hollywood, FL 33025- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code June Epstein-David 350 S. Hollybrook Terrace Hollywood, FL 33025- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,250.00.

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20020112500

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Thomas Equels 2821 Marquesas Ct. Windermere, FL 34786 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holtzman, Krinzman, Equels, Furia Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Shjsel Equities 600 3rd Ave. New York, NY 10270- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Shepard Lane Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Roy Estes 2951 S.R. 520 Cocoa, FL 32926- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Track & Tire Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Roy Estes 2951 S.R. 520 Cocoa, FL 32926- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Track & Tire Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code David Ettinger 7103 Encina Lane Boca Raton, FL 33433- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Building Contractor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Lawrence Evans P.O. Box 25789 Sarasota, FL 34277-2789 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Benjamin Everidge 903 Grovesmere Loop Ocoee, FL 34761- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Everidge Group, Inc. Occupation CEO Aggregate Year-to-Date -> 25.00	Date (month, day, year) 01/18/2000 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)

3,275.00

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ITEMIZED RECEIPTS

20020412561

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Benjamin Everidge 903 Grovesmere Loop Ocoee, FL 34761- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Everidge Group, Inc. Occupation CEO Aggregate Year-to-Date -> 50.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 25.00
B. Full Name, Mailing Address and Zip Code Nanette M. Everidge 903 Grovesmere Loop Ocoee, FL 34761- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Everidge Group Occupation President Aggregate Year-to-Date -> 25.00	Date (month, day, year) 01/18/2000	Amount of Each Receipt this Period 25.00
C. Full Name, Mailing Address and Zip Code Richard Fain 700 Arvida Parkway Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Royal Caribbean Cruises Ltd. Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code William Fairbourn 4041 N. Central Ave., Suite 1100 Phoenix, AZ 85012- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bonnett, Fairbourne et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Laura Faragasso 1100 Alameda Dr. Tallahassee, FL 32311- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and Zip Code Fredrico Fazio 633 S. Andrews Ave. Fort Lauderdale, FL 33302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fazio Dawson Disalvo et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Fredrico Fazio 633 S. Andrews Ave. Fort Lauderdale, FL 33302- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fazio Dawson Disalvo et al Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,350.00

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ITEMIZED RECEIPTS

20020312862

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Allan Feder 3959 Boca Pointe Dr. Sarasota, FL 34238-5507 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mark A. Feder Associates Occupation Management Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/24/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Scott Feder 4649 Ponce De Leon Blvd., Suite 402 Miami, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Carol Feinberg 2 North Breakers Row, #S-22 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Merle Feinberg 11 Maitland Grove Road Maitland, FL 32751- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Luis Fernandez 246 Eden Road Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Florida Crystals Occupation COO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Mindy Fernandez 8100 Old Cutler Rd. Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Richard Ferry 11301 Knot Way Hollywood, FL 33026- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

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SCHEDULE A

ITEMIZED RECEIPTS

20020112500

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Richard Ferry 11301 Knot Way Hollywood, FL 33026- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Laurence Finberg 152 Lombard St. #602 San Francisco, CA 94111 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/02/2000 Earmarked Move On	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Alan Fine 10900 Snapper Creek Rd. Miami, FL 33156-3461 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fine & Associates Occupation Lawyer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Richard Finkelstein 1000 Clint Moore Rd. #110 Boca Raton, FL 33487- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kenco Occupation Developer Aggregate Year-to-Date -> 100.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 100.00
F. Full Name, Mailing Address and Zip Code Elizabeth Fiorentino 2550 S. Bayshore Dr. Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation restaurateur Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Burnett Firstenberger 839 Orchid Dr. Boca Raton, FL 33432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Beauchamp Construction Occupation Construction Aggregate Year-to-Date -> 50.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)

2,900.00

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Stephen Fischer 8103 SW 91st Ave. Miami, FL 33173-4182 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Fisher Law Firm Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Anne Fisher 334 North Woods Road Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/20/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Anne Fisher 334 North Woods Road Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/06/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Jerome Fisher 334 North Woods Rd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/06/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code James Fishman 11120 Killian Park Rd. Miami, FL 33156- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer James Fishman, PA Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code David Fitch 5050 Yacht Club Rd Jacksonville, FL 32210- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Joe Commercial Group Occupation President/Real Estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Robert Flanders 3106 Dick Wilson Drive Sarasota, FL 34240-8736 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Contractor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112565	Use this schedule(s) for the category of the Detailed Summary Page	PAGE 49 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jacqueline Flood 783 Cordova Dr. Boca Raton, FL 33432-8109 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer V.J. Flood, Inc. Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code William Florence 220 Miracle Mile, Suite 238 Coral Gables, FL 33134-5909 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Patrick Foley 569 N. Country Club Drive Atlantis, FL 33462- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Earline Ford 20490 NW 22nd Court North Miami Beach, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bank United Occupation Banker Aggregate Year-to-Date -> 350.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 350.00
E. Full Name, Mailing Address and Zip Code Frederick Ford 631 U.S. Highway One, Suite 411 North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Law Firm Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Hector Fortun 365 Palermo Ave. Coral Gables, FL 33134- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fortun Insurance Company Occupation Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Hector Fortun 365 Palermo Ave. Coral Gables, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fortun Insurance Company Occupation Agent Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412560

This schedule is
for the category of the
Detailed Summary Page

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Mary Foshee 960 Strathmore Dr. Orlando, FL 32806-1731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 25.00	Date (month, day, year) 01/11/2000	Amount of Each Receipt this Period 25.00
B. Full Name, Mailing Address and Zip Code Mary Foshee 960 Strathmore Dr. Orlando, FL 32806-1731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 50.00	Date (month, day, year) 02/04/2000	Amount of Each Receipt this Period 25.00
C. Full Name, Mailing Address and Zip Code Mary Foshee 960 Strathmore Dr. Orlando, FL 32806-1731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 75.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 25.00
D. Full Name, Mailing Address and Zip Code Mary Foshee 960 Strathmore Dr. Orlando, FL 32806-1731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 25.00
E. Full Name, Mailing Address and Zip Code H.R. Foxworthy 7200 Chameleon Way Sarasota, FL 34241- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Anthony Frasca 1100 E. Oakland Park Blvd. Oakland Park, FL 33334 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation restauranteur Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code James Free 1401 K St., NW #1200 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Smith Free Group Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412567 Use 2 to create schedule(s) for each category of the Detailed Summary Page	PAGE 51 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Lewis Freeman 3250 Mary St., #100 Coconut Grove, FL 33133 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lewis B. Freeman & Partners Occupation Accounting Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
B. Full Name, Mailing Address and Zip Code Lewis Freeman 3250 Mary St., #100 Coconut Grove, FL 33133 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lewis B. Freeman & Partners Occupation Accounting Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,000.00
C. Full Name, Mailing Address and Zip Code Bernard Freid 3825 Indian Beach Place Sarasota, FL 34234-5241 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00
D. Full Name, Mailing Address and Zip Code Philip Freidin 3182 Munroe Dr. Coconut Grove, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Freidin & Brown Occupation Attorney Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
E. Full Name, Mailing Address and Zip Code Andrew Friedman 6242 N. 4th Dr. Phoenix, AZ 85013- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 500.00
F. Full Name, Mailing Address and Zip Code Andrew Friedman 6242 N. 4th Dr. Phoenix, AZ 85013- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period -1,000.00 Aggregate Year-to-Date -> -500.00 MEMO
G. Full Name, Mailing Address and Zip Code Jack Friedman 901 N. Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112568

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jack Friedman 901 N. Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Jack Friedman 129 Aurley St. Kew Gardens, NY 11418- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Franklin Center Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Jacob Friedman 2500 S. Ocean Blvd., #2 B3 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Marianne Friedman 6242 North Fourth Dr. Phoenix, AZ 85013- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Reattribution	Amount of Each Receipt this Period 1,000.00 MEMO
E. Full Name, Mailing Address and Zip Code Frank Frione 361 Oregon Lane Boca Raton, FL 33487-1431 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Engineer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Hans Frisch P.O. Box 41430 Jacksonville, FL 32203-1430 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Beaver Street Fisheries Occupation Chairman Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Phillip Frost 8800 NW 36th Street Miami, FL 33178- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer IVAX Corporation Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Florida 2000	Amount of Each Receipt this Period 1,000.00 MEMO

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112580	Use this schedule(s) for category of the Detailed Summary Page	PAGE 53 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Phillip Frost 8800 NW 36th Street Miami, FL 33178- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer IVAX Corporation Occupation CEO Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Florida 2000 Amount of Each Receipt this Period 1,000.00 MEMO
B. Full Name, Mailing Address and Zip Code Arthur Furia The Grand Penthouse C-57 1717 N. Bayshore Drive Miami, FL 33132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holtzman, Krinzman, Equels, Furia Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Ariel Furst 8367 Bird Road Miami, FL 33155- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Margaret Gagnon 1647 Eagles Landing Blvd., Apt # 3 Tallahassee, FL 32308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bill Nelson for U.S. Senate Occupation Treasurer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/18/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Robert Gaines 8839 Burning Tree Road Pensacola, FL 32514- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Beggs & Lane Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Shatzi Gaines 782 Seaview Dr. Juno Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/11/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Joseph Garcia 1407 Ferdinano St. Miami, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer VIVRA Occupation Health Care Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412570

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Ruben Garcia 70 Shore Drive West Miami, FL 33133- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Primus Health Care Group Occupation Administrator Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Gloria Gary 36 Rio Vista Dr. Stuart, FL 34996- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/09/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Gloria Gary 36 Rio Vista Dr. Stuart, FL 34996- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/09/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code James Gavigan 1510 North Ocean Blvd. Suite 214 Palm Beach, FL 33480 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Joseph Geller 7552 West Treasure Dr. North Bay Village, FL 33141- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Charles George 4800 Le Jeune Rd. Coral Gables, FL 33146 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer George, Hartz, et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Gary Gerson 666 - 71st Street Miami Beach, FL 33141- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gerson, Preston & Company, PA Occupation CPA Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112571

 Attach to schedule (a)
 for category of the
 Detailed Summary Page

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 FOR LINE NUMBER
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Peter Gilbert 3073 Rio Baya North Indialantic, FL 32903- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Melvin F. Levine & Associates, Occupation Physician Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00
B. Full Name, Mailing Address and Zip Code Robert Gilbert 133 Sevilla Ave Coral Gables, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
C. Full Name, Mailing Address and Zip Code Sibyl Gillman 1255 N. Guldstream Ave., #301 Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Date (month, day, year) 03/07/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
D. Full Name, Mailing Address and Zip Code David Gilmore 953 Briarwood Dr. West Palm Beach, FL 33415- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
E. Full Name, Mailing Address and Zip Code Marc Ginsberg 2085 Ixora Rd. North Miami, FL 33181-2311 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mandina & Ginsberg Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
F. Full Name, Mailing Address and Zip Code Paul Glassman 5640 Collins Ave. , Apt. 3A Miami, FL 33140- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Around the Clock Medical Cts. Date (month, day, year) 02/21/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
G. Full Name, Mailing Address and Zip Code David Glatthorn 654 Riverside Rd. North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112572

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Felix Glaubach 5 Lighthouse Road Great Neck, NY 11024-1115 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Robert Gluck 644 Cambridge Terrace Weston, FL 33326- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 750.00
C. Full Name, Mailing Address and Zip Code Thomas Godart 330 Isle of Capri Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Equis Corporation Occupation Real estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Sharon Goldasich P.O.Box 811988 Boca Raton, FL 33481- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Alan Goldberg 111 SW 3rd Street #701 Miami, FL 33130- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Crisis Mngt. Inc. Occupation Federal Trustee Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Alan Goldberg 999 Eller Dr., Suite A8 Fort Lauderdale, FL 33316- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Diversified Oil Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Melissa Goldberg 111 SW 3rd St., #701 Miami, FL 33130- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

 112578
 Attach schedule(s)
 to this category of the
 Detailed Summary Page

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FOR LINE NUMBER
11(a)(i)

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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Melissa Goldberg 111 SW 3rd St., #701 Miami, FL 33130- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Ronald Goldberg 3130 Equestrian Drive Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Carpentry Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Alan Goldfarb 100 SE 2nd St., Suite 3900 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Goldfarb, Gold, Gonzalez & Wal Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Howard Gordon 2 Adalia Avenue, Unit 501 Tampa, FL 33606-3316 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cohen, Jayson & Foster Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Murray Gorson 721 Cornerstone Lane Bryn Mawr, PA 19010-2075 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Eagle National Bank Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Seymour Grabel 767 Fifth Ave., 26th Floor New York, NY 10153- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Michael Granoff 7 Skymeadow Farm Purchase, NY 10577-2508 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pomona Capital Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002042574

Use this schedule (a) for category of the Detailed Summary Page

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Randi Grant One SE Thrid Ave., 15th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accountant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Mary Graves 1015 34th Avenue Vero Beach, FL 32960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/23/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Richard Graves P.O. Box 277 Wabasso, FL 32970- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Graves Brothers Occupation Agriculture Aggregate Year-to-Date -> 214.53	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 214.53 IN-KIND
D. Full Name, Mailing Address and Zip Code Dominick Graziano 100 South Ashley Drive Suite 2100 Tampa, FL 33602-5311 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Baval, Bush, & Sisco Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Judson Green 9200 Point Cypress Drive Orlando, FL 32836- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Walt Disney Attractions, Inc. Occupation President/Entertainment Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Martin Greenberg 17375 St. James Court Boca Raton, FL 33496- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Stewart Greenberg 12118 NW 9th Dr. Pompano Beach, FL 33071- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)

2,764.53

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112575

Attach schedule(s) to this category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Patricia Greenwald 830 Park Ave. New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Alan Greer 224 Ridgewood Road Coral Gables, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Floyd Pearson Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Frank Grey 9535 Star Trail New Port Richey, FL 34654-2523 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hobby, Grey & Reeves Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Elsie R. Griffin 911 Park Avenue North Winter Park, FL 32789-2535 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 750.00
E. Full Name, Mailing Address and Zip Code Michael Griffin 2111 Jefferson Davis Highway Suite 215 South Arlington, VA 22202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Griffin Media Group Occupation Communications Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Patrick Griffin 1015 33rd Street NW, #406 Washington, DC 20007- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Griffin Johnson Dover & Stewar Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Ilene Grossbard 337 Passage Way Osprey, FL 34229-9749 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer S County Gastroenterology Occupation Registered Nurse Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/07/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412570

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Stanley Grossman 34 Sterling Rd. Harrison, NY 10528- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Philip Guerra 5203 SW 71st Place Miami, FL 33155- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Adorno & Berk Occupation CPA Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Frederick Gunion 13915 SW 73rd Ave. Miami, FL 33158- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Michelle Haben 3208 Brentwood Way Tallahassee, FL 32308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Marvin Haber P.O. Box 15985 Sarasota, FL 34277- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Edward Haddock 641 Pinetree Road Winter Park, FL 32789- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Full Sail Recorders Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Theodore Hainline 4719 Ivanhoe Road Jacksonville, FL 32210-5806 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002042577 Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 61 OF 157
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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Craig Hall 2595 Dallas Pkwy., Ste 300 Frisco, TX 75034- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hall Financial Group Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Craig Hall 2595 Dallas Pkwy., Ste 300 Frisco, TX 75034- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hall Financial Group Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Michael Hall 900 South 26th Place Arlington, VA 22202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Powers Pyles Sutter Occupation Government Relations Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Walter Hall 507 Lake Shore Dr. Pasadena, MD 21122- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The English Company Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Andrew Hament 3073 Rio Plumosa South Indialantic, FL 32903 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 200.00
F. Full Name, Mailing Address and Zip Code John Hamilton 525 N. Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nance, Cacciatore, Sisserson Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code John Hamilton 525 N. Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nance, Cacciatore, Sisserson Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412570	Use appropriate schedule(s) for each category of the Detailed Summary Page	PAGE 62 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code George Hamner P.O. Box 3627 Vero Beach, FL 32964-3627 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Indian River Exchange Packers Occupation Agriculture Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Jerry Hamovit 775 Longboat Club Rd., #608 Longboat Key, FL 34228- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Janice Hanzman 3453 NE 210 Terrance Miami, FL 33131-2310 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Daniel Hardin 5645 Nova Rd. Saint Cloud, FL 34771-8654 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Street Information Systems Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Lance Harke 201 S. Biscayne Blvd- Ste 1050 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hector & Hector Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Edwin Harper 1250 Parkwood Circle, Apt. 314 Atlanta, GA 30339- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assurant Group Occupation Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code J. Ira Harris c/o Mr. Jonathon Tisch 655 Madison 8th Floor New York, NY 10021-8043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Pritzher Organization Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002042570	Use this schedule(s) for category of the Detailed Summary Page	PAGE 63 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Nicki Harris 310 Wells Road Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Pritzker Organization Occupation Investor	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
B. Full Name, Mailing Address and Zip Code Charles Hartz #25 Tahiti Beach Island Coral Gables, FL 33143-6540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer George, Hartz et al Occupation Attorney	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
C. Full Name, Mailing Address and Zip Code Joy Hartz #25 Tahiti Beach Island Coral Gables, FL 33143 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
D. Full Name, Mailing Address and Zip Code Bob Hattaway P.O.Box 884 Altamonte Springs, FL 32715-0884 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
E. Full Name, Mailing Address and Zip Code Helen Hauser 1520 Robbia Ave. Coral Gables, FL 33146 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dittmer & Hauser, PA Occupation Attorney	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
F. Full Name, Mailing Address and Zip Code Mark Hauser 1520 Robbia Ave. Coral Gables, FL 33146 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer South Florida Pulmonary Group, Occupation Physician	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
G. Full Name, Mailing Address and Zip Code Jeffrey Haynes 7146 E. Lago Dr. Miami, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412580

Indicate schedule(s) for category of the Detailed Summary Page

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FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Richard Heinle 8100 Vineland Oaks Blvd. Orlando, FL 32835 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Foley & Lardner Occupation Attorney Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 100.00
B. Full Name, Mailing Address and Zip Code Robert Heller One Paragon Drive Suite 145 Montvale, NJ 07645- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Charles Herbert 415 Normandy Dr. Indialantic, FL 32903- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Harris Corporation Occupation Vice President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000 Earmarked Harris FEPAC	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through Harris FEPAC Federal Political Action Committee Melbourne, FL 32919 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Robert Hertzberg 100 SE 2nd St., STE. 3550 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Kathy Hewitt 1055 St. Mellion St. Nevillewood, PA 15142- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Mark Higgins 4010 NW 4th Court Coconut Creek, FL 33066- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer C.P. Higgins Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

112501 Attach schedule(s) to category of the Detailed Summary Page	PAGE 65 OF 157 FOR LINE NUMBER 11(a)(i)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Mark Higgins 4010 NW 4th Court Coconut Creek, FL 33066- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer C.P. Higgins Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code E. W. Hinson Box 1169 Quincy, FL 32351 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hinson Oil Company Occupation Partner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Clyde Hobby 5709 Tidalwave Dr. New Port Richey, FL 34652-3821 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hobby, Grey & Reeves Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Arnold Hoffman 1510 Bradley, Apt. 616 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Shari Hoffman 55 Cobb Rd. Mountain Lakes, NJ 07046-1106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Accountant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code William Hoffman 999 Brickell Avenue, Suite 650 Miami, FL 33131 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hoffman & Hoffman, P.A. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/28/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code John Hogan 114 NE 3 Terrace San Marino Island Miami Beach, FL 33139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412582

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

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 FOR LINE NUMBER 11(a)(i)

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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Anita Holec 1708 Casey Key Road Nokomis, FL 34275- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Michael Holmes 12200 S.W. 2nd St. Plantation, FL 33325- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Brown & Brown Insurance Occupation Agent Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/12/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Julianne Holt P.O. Box 172417 Tampa, FL 33602- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hillsborough County Occupation Public Defender Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Edward Horovitz 6 Sunup Irvine, CA 92715 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation jeweler Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Edward Horovitz 6 Sunup Irvine, CA 92715 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation jeweler Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Susan Horovitz-Mauer 3600 N. Federal Highway, 3rd Floor Fort Lauderdale, FL 33308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Panza Maurer Maynard & Neel PA Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Yvonne Hoyman 844 Oak Park Dr. Melbourne, FL 32940- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)

4,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

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

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Edwin Hudson 314 Belmont Road Tallahassee, FL 32301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Henry, Buchanan, Hudson, Suber Occupation Attorney	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 300.00 Aggregate Year-to-Date -> 300.00
B. Full Name, Mailing Address and Zip Code William Huggett Suite 400 Concord Building Miami, FL 33130- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
C. Full Name, Mailing Address and Zip Code Timothy Hughes 7301 Capilla Court Coral Gables, FL 33143-6114 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Steele, Hector & Davis Occupation Attorney	Date (month, day, year) 02/29/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
D. Full Name, Mailing Address and Zip Code Ronald Huneycutt 114 SE 15th Ave. Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Recreational Holdings Occupation Chief Financial Officer	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
E. Full Name, Mailing Address and Zip Code Robert Hyde 3217 Riverside Ave. Jacksonville, FL 32205-8627 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00
F. Full Name, Mailing Address and Zip Code Wallace Hyde P.O. Box 6027 Sarasota, FL 34278- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
G. Full Name, Mailing Address and Zip Code Horace Havemeeyer Iii 10 Gracie Square New York, NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bellerophon Publications, Inc. Occupation Magazine Publishing	Date (month, day, year) 02/17/2000 Earmarked Move On	Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00

SUBTOTAL of Receipts This Page (optional)

3,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412504	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 68 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn.Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) Amount of Each Receipt this Period
B. Full Name, Mailing Address and Zip Code Robert Infeld 2804 N. 46th Ave. Apt. C-627 Hollywood, FL 33021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Accountant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Gary Isaacson 6651 Crenshaw Dr. Orlando, FL 32835- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/09/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Samuel Isaacson 6675 NW 25th Way Boca Raton, FL 33496-1642 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Gem Group Occupation Chairman Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and Zip Code Eli Jacob 9 Island Ave., PH-6 Miami Beach, FL 33139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/28/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Sheila Jacobs 3967 Torrey Pines Blvd. Sarasota, FL 34238-2839 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Sheila Jacobs 3967 Torrey Pines Blvd. Sarasota, FL 34238-2839 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A
ITEMIZED RECEIPTS

2002

This schedule(s) is/are a category of the Detailed Summary Page

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Irving Jaffe 20290 Fairway Oaks Dr. #284 Boca Raton, FL 33434-3246 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Surgical Supplies Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Joel Jankowsky 1333 New Hampshire Ave., NW Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Akin, Gump, Strauss Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Julio Jaramillo 2230 SW 100th Ave. Miami, FL 33165- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Abadin & Jaramillo Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code John Jaskot 9226 Lake Braddock Rd. Burke, VA 22015- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jones Walker Occupation Partner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Jimmy Joannou 2427 Sea Island Drive Fort Lauderdale, FL 33301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Classic Brass Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Clark Johnson 11736 Lost Tree Way North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Clark Johnson 11736 Lost Tree Way North Palm Beach, FL 33408- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412580

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code George Johnson P.O. Box 3524 Spartanburg, SC 29304- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Jon Johnson 1290 Federal Highway Rockledge, FL 32955 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Johnson & Baughan, PA Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Susan Johnson P.O. Box 3524 Spartanburg, SC 29304- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Allan Jones 150 Centenary Ave., NW Cleveland, TN 37311-4421 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Proctor Jones 1117 Alden Rd. Alexandria, VA 22308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Johnston & Associates Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Thomas Jones 17950 SW 285th Street Homestead, FL 33030- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Thomas Jones 17950 SW 285th Street Homestead, FL 33030- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012587	Attachment schedule(s) for category of the Detailed Summary Page	PAGE 71 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michael Josephs 2950 SW 27 Ave Suite 100 Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Josephs Jack Gaebe Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Michael Josephs 2950 SW 27 Ave Suite 100 Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Josephs Jack Gaebe Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Bradley Joyner 240 Havana Highway Quincy, FL 32351- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Agriculture Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code William Kaczynski 4420 Palmarito St. Miami, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Trivest, Inc. Occupation Equities Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Manuel Kadre 1503 Alberca St. Coral Gables, FL 33134-2448 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Eagle Brand Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code H. Scott Kahle Post Office Box 1651 Deerfield Beach, FL 33443- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/28/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Morton Kalin P.O. Box 8420 Pembroke Pines, FL 33084- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pasadena Homes Occupation Associate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002	112588	Is this date schedule(s) for the category of the Detailed Summary Page	PAGE 72	OF 157
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code William Kalish Post Office Box 71 Tampa, FL 33601-0071 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kalish & Ward, P.A. Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/11/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code William Kalish Post Office Box 71 Tampa, FL 33601-0071 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kalish & Ward, P.A. Occupation Attorney Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Michael Kalman 1015 Ainslie A Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Soneet Kapila 3078 Old Still Lane Fort Lauderdale, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kapila & Company Occupation Partner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Gerald Kaplan 1701 Gulf of Mexico Dr. Longboat Key, FL 34228- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Stanley Katz 2 North Breakers Row Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Jerold Kaufman 19195 Mystic Point Drive, #2607 Aventura, FL 33180- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer International Sales Group Occupation Real estate Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/28/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412589

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jerold Kaufman 19195 Mystic Point Drive, #2607 Aventura, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer International Sales Group Occupation Real estate	Date (month, day, year) 03/28/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,000.00
B. Full Name, Mailing Address and Zip Code Nancy Kaufman 19195 Mystic Point Drive, #2607 Aventura, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/28/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
C. Full Name, Mailing Address and Zip Code James Kaywell 2455 Nuremberg Blvd. Punta Gorda, FL 33983- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
D. Full Name, Mailing Address and Zip Code Ivey Kearson 20 NW 88th St. Miami, FL 33150- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired	Date (month, day, year) 01/11/2000	Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00
E. Full Name, Mailing Address and Zip Code Lesley Keegan 8105 White Cliff Rd., Unit J8 Egg Harbor, WI 54209- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
F. Full Name, Mailing Address and Zip Code Ann Kennedy 5108 Stonehurst Road Tampa, FL 33647- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/20/2000 Event Expense	Amount of Each Receipt this Period 399.97 Aggregate Year-to-Date -> 399.97 IN-KIND
G. Full Name, Mailing Address and Zip Code Ann Kennedy 5108 Stonehurst Road Tampa, FL 33647- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 899.97

SUBTOTAL of Receipts This Page (optional)

4,649.97

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112590

See the schedule(s) for the category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code James Kennedy 5108 Stonehurst Road Tampa, FL 33647 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Ingersoll Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Willaim Kent 17031 W. Dixie Highway Miami Beach, FL 33160- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Southern Parking Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Patricia Kessler 1 Commonwealth Ave. Boston, MA 02116- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Patricia Kessler 1 Commonwealth Ave. Boston, MA 02116- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Harry Kettmer 128 Grafton St. Chevy Chase, MD 20815- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Arnold Kideckel 555 Kappock Street, Apt. 17D Bronx, NY 10463-6458 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wilson, Elser, Moskowitz, et.al Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code William King 13900 Ishnala Circle Wellington, FL 33414- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412594

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

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 11(a)(i)

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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Barry Klein 2942 Medinah Fort Lauderdale, FL 33332-1840 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Smith Barney Occupation Broker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Henry Klein 1 Grove Isle Drive, Apt. 1603 Miami, FL 33133 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Codinea Group Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Jehuda Klein 2001 Wolverson Ave. Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Lynn Klein 412 Oyster Road North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Marina Klein 12350 Vista Lane Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Philip Kobrin 411 Cortland Ave. Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Karl Koch 2901 W. Sitios Street Tampa, FL 33629- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pewey Square Group Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412592

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

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Karl Koch 2901 W. Sitios Street Tampa, FL 33629- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pewey Square Group Occupation Consultant Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code George Koehn 1003 Temple Grove Winter Park, FL 32789 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer SunTrust Occupation Banking Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Burton Koffman 300 Plaza Dr. Vestal, NY 13850- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Darryl Kogan 7783 La Corniche Circle Boca Raton, FL 33433- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kogan & DiSalvo, P.A. Occupation Attorney Aggregate Year-to-Date -> 333.33	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 333.33
E. Full Name, Mailing Address and Zip Code Dorothy Kohl 1070 North Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Dorothy Kohl 1070 North Lake Way Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Sidney Kohl 1070 North Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Sidney Kohl Company Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,833.33

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412500	Use to complete schedule(s) for category of the Detailed Summary Page	PAGE 77 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Sidney Kohl 1070 North Lake Way Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Sidney Kohl Company Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Paul Kolbert 5505 North Military Trail, #313 Boca Raton, FL 33496- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Henry Kort 20320 Fairway Oaks Dr., 332 Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Bernie J. Kosar, Jr. c/o David Epstein Precesion Response Corp. Plantation, FL 33324- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Athlete Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Bernie J. Kosar, Jr. c/o David Epstein Precesion Response Corp. Plantation, FL 33324- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Athlete Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Michael Kosnitzky 450 W. Di Lido Dr. Miami, FL 33139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Zack Kosnitzky P.A. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Erika Kovalick 3400 Somerset Trace Marietta, GA 30067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112594

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code John Kozyak 200 South Biscayne Boulevard Suite 2800 Miami, FL 33131-	Name of Employer Kozyak Tropin & Throckmorton Occupation Attorney	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
B. Full Name, Mailing Address and Zip Code Mitchel Kramer 2504 Oakbrook Court Fort Lauderdale, FL 33332-3440	Name of Employer Interim Financial Solutions Occupation Director	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Mitchel Kramer 2504 Oakbrook Court Fort Lauderdale, FL 33332-3440	Name of Employer Interim Financial Solutions Occupation Director	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,500.00		
D. Full Name, Mailing Address and Zip Code Denise Kundid 430 North Atlantic Blvd. Daytona Beach, FL 32118-	Name of Employer Sea Dunes Apartments Occupation Owner	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Michael Kundid 444 Seabreeze Boulevard Suite 800 Daytona Beach, FL 32118-	Name of Employer Doran & Wolfe Occupation Attorney	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Barry Kutun 2012 Fisher Island Drive Miami, FL 33109-	Name of Employer Self Employed Occupation Consultant	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Vincent Lamb 11590 Point Dr. Merritt Island, FL 32952-	Name of Employer Self Employed Occupation Developer	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112595	Attach schedule(s) for category of the Detailed Summary Page	PAGE 79 OF 157
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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Irv Lamel The Alhambra West, #100 95 Merrick Way Miami, FL 33134-	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
B. Full Name, Mailing Address and Zip Code Richard Lampen 350 Costa Brava Ct. Coral Gables, FL 33143-	Name of Employer Brook Group Ltd Occupation Executive	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
C. Full Name, Mailing Address and Zip Code Lydia Landin 2239 NW 5th Street Miami, FL 33125	Name of Employer Insurance Service & Adjusting Occupation Admininstration	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Steven Lapidus 6969 SW 101st Street Miami, FL 33156	Name of Employer Greenberg Traurig Occupation Attorney	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code Christopher Larmoyeux P.O. Drawer 3086 West Palm Beach, FL 33402-3086	Name of Employer Montgomery Larmoyeux Occupation Attorney	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
F. Full Name, Mailing Address and Zip Code Marilyn Lassen 2770 S. Ocean Blvd., #S-203 Palm Beach, FL 33480-	Name of Employer Sizzler Properties Occupation Chairman	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Dale Lauer 3801 Bobbin Brook Cir. Tallahassee, FL 32312-1219	Name of Employer Capital Insurance Agency Occupation Agent	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002042500

 Attach Date schedule(s)
 for Category of the
 Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Dale Lauer 3801 Bobbin Brook Cir. Tallahassee, FL 32312-1219 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Capital Insurance Agency Occupation Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 750.00
B. Full Name, Mailing Address and Zip Code Michael Lazar 419 Park Avenue, South New York, NY 10016- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Lazar Group Occupation Real estate Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Bennie Lazzara 52 Adalia Tampa, FL 33606- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wilkes & McHugh Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Albert Leach P.O. Box 1700 Bradenton, FL 34206- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Leach & Leach Inc. Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/07/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Isabelle Leeds 120 Sunset Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Ira Leesfield 144 North Prospect Dr. Coral Gables, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Leesfield Leighton Rubio et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Donald Lefton 3250 Mary St. Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carnival Resorts & Casinos Occupation Vice Chairman Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112507

 Attach schedule(s)
 and category of the
 Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Paul Lehrer 1920 Parkside Circle S. Boca Raton, FL 33486- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 100.00	Date (month, day, year) 01/26/2000 Florida 2000 Amount of Each Receipt this Period 100.00 MEMO
B. Full Name, Mailing Address and Zip Code Mark Leibowitz 10042 SW 57th Court Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Robert Leichtenberg 2235 S. Babcock St. Melbourne, FL 32901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Tova Leidesdorf 540 Brickell Key Dr. No. 1028 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Michael Lenhart 8703 Finlarig Dr. Dublin, OH 43017-9625 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Paul Lester 9603 S. W. 69th Place Pinecrest, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Feildstone Lester Shear Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Frederic Levin 316 South Baylen Street Pensacola, FL 32501- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Martin Levin Post Office Box 32581 Pensacola, FL 32581- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Stephen Levin 446 North Lake Way Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Stephen Levin 446 North Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Abner Levine 16858 River Birch Circle Delray Beach, FL 33445- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Barbara Levinson 318 North Woods Rd. Palm Beach, FL 33480-3510 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Irwin Levy 900 North Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Irwin Levy 900 North Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michael Levy 230 Eighth St. SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Brownstein, Hyatt Farber etal Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Anne Lewis 460 N. Victoria Park Road Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Strategic Technologies Occupation Office Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Ben Lewis 4234 Gulf of Mexico Dr. #T-1 Longboat Key, FL 34228- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Cheryl Lewis 8091 SW 24th Place Miramar, FL 33025- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Daniel Lewis 8091 SW 24th Place Miramar, FL 33025- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Strategic Technologies Occupation Research Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Darryl Lewis 5550 NW 38th Terrace Coconut Creek, FL 33073- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Robert Lewis 5987 Colonel Scott Drive Tallahassee, FL 32308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lewis, Longman & Walher Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/12/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112800

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Terry Lewis 5703 High Flyer Rd. S. Palm Beach Gardens, FL 33418- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lewis, Longman & Walher Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/11/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Ruth Libert 1215 East Lake Colony Dr. Maitland, FL 32751- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Ruth Libert 1215 East Lake Colony Dr. Maitland, FL 32751- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Ann Lieff P.O. Box 430330 Miami, FL 33243- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Lieff Company Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Jeffrey Liggio 1615 Forum Place, Suite 3-B West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Richard Lightman P.O. Box 171809 Memphis, TN 38187-1809 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Malco Theatres, Inc. Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/28/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Julian Linares 1717 N. Bayshore Dr., Apt. 1055 Miami, FL 33132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sacha Enterprises Inc. Occupation Public Relations Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112604

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Blucher Lines P.O. Box 550 Quincy, FL 32353- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Barry Lipman 316 Walnut St. San Francisco, CA 94118- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Goldfarb & Lipman Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Marie Lipman 316 Walnut St. San Francisco, CA 94118- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Ben Lipps 67 Marlborough St., Unit 3 Boston, MA 02116-2043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Marc Lipsitz 3445 Royal Palm Ave. Miami Beach, FL 33140- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Camner, Lipsitz Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Rita Lipton 7324 Mahogany Court Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Scott Livingston 162 Reni Road Manhasset, NY 11030- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cowen & Company Occupation Securities Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012802

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Robert Loehr 15 McLane Road Gulf Breeze, FL 32561- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Stewart Logan Museum Tower Suite 2150 150 West Flagler Street Miami, FL 33130- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Logan & Hibnick, P.A. Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Hector Lombana 1233 San Ignacio Ave. Miami, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gamba & Lombana Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Donald Long 375 Commerce Parkway Rockledge, FL 32955- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Ingersoll Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Donald Long 375 Commerce Parkway Rockledge, FL 32955- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Ingersoll Occupation Partner Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Katherine Long 375 Commerce Parkway Rockledge, FL 32955- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Health Care Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Katherine Long 375 Commerce Parkway Rockledge, FL 32955- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Health Care Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,800.00

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Debbie Lorenz 2864 NE 25th Court Fort Lauderdale, FL 33305- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Timothy J. Lorenz 2864 NE 25th Court Fort Lauderdale, FL 33305- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ruden, McClosky, Smith et. al. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Raymond Loubier 6098 N.W. 80th Terrace Parkland, FL 33067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Beta Construction Occupation Carpentry Company Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Jonathan Low 272 Cordova Rd. West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ernst & Young Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Sheldon Lowe 445 Grand Bay Drive, PH I-A Key Biscayne, FL 33149- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lowes Realty Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Paul Lowenthal 901 Malaga Ave. Coral Gables, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Southern Audio Visual Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Mitchell Lundeen 3211 Anderson Rd. Coral Gables, FL 33134 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer George, Hartz et al Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)	4,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112804

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Lake Lytal 1030 Sea Acres Way Juno Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Palm Beach Law Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code David Mack 370 West Passaic St. Rochelle Park, NJ 07662- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Mack Company Occupation Real estate Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code David Mack 370 West Passaic St. Rochelle Park, NJ 07662- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Mack Company Occupation Real estate Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Ruth Mack 100 Sunrise Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Sondra Mack 370 W. Passaic St. Rochelle Park, NJ 07662- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Alexander Mackinnon 875 Old England Avenue Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Smith Mackinnon Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 300.00
G. Full Name, Mailing Address and Zip Code Betsy Mahin 4035 Alhambra Drive, West Jacksonville, FL 32207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,550.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michael Malaghan 1540 The Green Way Jacksonville Beach, FL 32250- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer World Family Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/28/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Jay Malina 6055 N.W. 82nd Avenue Miami, FL 33166- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer xebec- trade finance corp. Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/11/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code David Mallen 2300 Randall Road Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 200.00
D. Full Name, Mailing Address and Zip Code Jeryl Malloy 9 Oak Crest Darien, CT 06820-3526 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Salomon Smith Barney Occupation Broker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/28/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Albert Mancini 2200 W. Sunrise Blvd. Fort Lauderdale, FL 33311-5755 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer US Concrete Occupation Construction Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Joseph Mandel 101 Worth Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Bonnie Mannheimer 2100 West Randolph Circle Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/24/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,450.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Douglas Mannheimer 3975 Bobbin Brook Circle Tallahassee, FL 32312-1219 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Mary Mannheimer 3975 Bobbin Brook Circle Tallahassee, FL 32312-1219 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Bernice Manocherian 135 Central Park West, #9NC New York, NY 10023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berdar Equities Company Occupation Real estate Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Bernard Marden 1290 South Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Joseph Marino 2896 Deer Chase Lane York, PA 17403- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Marco Group, Inc. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/28/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Jerry Markowitz 9130 South Dadeland Boulevard Suite 1225 Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Markowitz Davis Ringel Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Bruce Marler 7731 Water Oak Point Rd. Pasadena, MD 21122-2342 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	5,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002 11 2007

Use this page to attach schedule(s) for each category of the Detailed Summary Page

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Mac Mascioli 1209 Delaware Ave. Fort Pierce, FL 34950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 604.53	Date (month, day, year) 03/10/2000 Event Expense	Amount of Each Receipt this Period 604.53 IN-KIND
B. Full Name, Mailing Address and Zip Code Joseph Matthews 5821 SW 163rd Avenue Fort Lauderdale, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Fount May 835 Altapulugus Highway Quincy, FL 32351- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer May Nursery Occupation Landscape Architect Aggregate Year-to-Date -> 100.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 100.00
D. Full Name, Mailing Address and Zip Code Fount May 835 Altapulugus Highway Quincy, FL 32351- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer May Nursery Occupation Landscape Architect Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 200.00
E. Full Name, Mailing Address and Zip Code Paul Mazak Post Office Box 362 Groveland, FL 34736- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mazak Properties Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Gerald Mc Hugh 4820 Florence Avenue Philadelphia, PA 19143-3421 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Litvinn, Blumberg, Matusaw & Yang Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/20/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Gerald Mc Hugh 4820 Florence Avenue Philadelphia, PA 19143-3421 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Litvinn, Blumberg, Matusaw & Yang Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/20/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,154.53

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012800

Date schedule(s)
for category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code William McAfee 8922 Estate Dr. West Palm Beach, FL 33411-6595 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Hardee McAlhane 3701 Sedgwick Place Orlando, FL 32806- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holiday RV Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Peter McAllister 1511 SW 1st Ave. Boca Raton, FL 33486- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Developer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code R.E. McCarty 1604 Oak Meadow Dr. Irving, TX 75061-2151 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Brock McClane 1306 Lancaster Dr. Orlando, FL 32806- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code William McCormick 1704 Lee Janzen Drive Kissimmee, FL 34744- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Joseph McCurdy 9690 NW 41 Street Miami, FL 33178- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/28/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Susan McDonald 4358 Worth Dr., E. Jacksonville, FL 32207 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers Towers Bailey Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Thomas McDonald 7630 Marblehead Lane Parkland, FL 33067- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Craven Thompson & Associates Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Julianne McDowell 2665 S. Bayshore Dr. Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Trivest, Inc. Occupation Equities Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Cappy McGarr 2911 Turtle Creek Blvd. #907 Dallas, TX 75219- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer McGarr Capital Management Occupation Asset Manager Aggregate Year-to-Date -> -1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period -1,000.00 MEMO
E. Full Name, Mailing Address and Zip Code Cappy McGarr 2911 Turtle Creek Blvd. #907 Dallas, TX 75219- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer McGarr Capital Management Occupation Asset Manager Aggregate Year-to-Date -> 0.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00 MEMO
F. Full Name, Mailing Address and Zip Code Craig McMillan P.O. Box 1919 Quincy, FL 32353-1919 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real Estate Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/06/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Bruce McNeillage 2101 W. Commercial Blvd., #5100 Fort Lauderdale, FL 33309 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Northwestern Mutual Life Occupation Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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20020112640

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Barry Meadow 11055 Girasol Ave. Coral Gables, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Jill Meenan 8862 Winged Foot Drive Tallahassee, FL 32313 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 375.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 375.00
C. Full Name, Mailing Address and Zip Code Timothy Meenan 8862 Winged Foot Drive Tallahassee, FL 32313 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Blank, Rigsby & Meenan Occupation Attorney Aggregate Year-to-Date -> 375.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 375.00
D. Full Name, Mailing Address and Zip Code Eric Meier 19355 Turnberry Way, Apt. 6-E Aventura, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Linda Meier 2800 Island Blvd. Apt. 16 Aventura, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Norman Meier Columbia Laboratories, Inc. 2875 NE 191 St., Suite 400 Aventura, FL 33180- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Columbia Laboratories, Inc. Occupation CEO - Health Care Aggregate Year-to-Date -> 0.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Richard Meisenberg 58 Taunton Road Scarsdale, NY 10583- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Palisade Capital Management Occupation Sr. Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 112811
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Richard Meisenberg 58 Taunton Road Scarsdale, NY 10583- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Palisade Capital Management Occupation Sr. Vice President	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,000.00
B. Full Name, Mailing Address and Zip Code Robert Meister 8 South Lake Trail Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Aon Risk Services Occupation Senior Vice President	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
C. Full Name, Mailing Address and Zip Code Salomon Melgen 12096 Captain's Landing North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Vitreo-Retinal Consultants Occupation Physician	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
D. Full Name, Mailing Address and Zip Code Victor Mendelson 825 Brickell Bay Dr. #1644 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Heico, Co. Occupation Vice President	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
E. Full Name, Mailing Address and Zip Code M.J. Menge 4080 Dunwoody Drive Pensacola, FL 32503- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Shell, Fleming, Davis & Menge Occupation Attorney	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 500.00 Aggregate Year-to-Date -> 500.00
F. Full Name, Mailing Address and Zip Code Delia Mestre 3829 SW 99th Ave., #6 Miami, FL 33165- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00
G. Full Name, Mailing Address and Zip Code Craig Metz 960 Saint Lyonn Courts Marietta, GA 30068-4532 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assurant Group Occupation Vice President	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

 112612
 This schedule is
 for category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Arthur Meyer 1601 Belvedere Road, Ste. 407-S West Palm Beach, FL 33406- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code William Meyer 1601 Belvedere Road Suite 407 West Palm Beach, FL 33406 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Hotelier Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Leila Meyerson 7172 Mandarin Dr. Boca Raton, FL 33433- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Interior Designer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Daniel Mica 7307 Burtonwood Dr. Alexandria, VA 22307- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Credit Union National Assn. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Diane Miller 1721 W. Aster Dr. Phoenix, AZ 85029- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Bonnett, Fairbourne et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Edmund Miller 1001 Brickell Bay Dr., 30th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interprise Technology Partners Occupation Principal Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Patricia Miller Mr. Lawrence Miller 13345 Miles Standish Port Palm Beach Gardens, FL 33410- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Wainwright Miller P.O. Box 204 Fort Myers, FL 33902- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Price Foundation Occupation Chairman Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Michael Minton 2513 South Indian River Drive Fort Pierce, FL 34950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dean, Mead, Minton & Klein Occupation Attorney Aggregate Year-to-Date -> 214.53	Date (month, day, year) 03/10/2000 Event Expense	Amount of Each Receipt this Period 214.53 IN-KIND
C. Full Name, Mailing Address and Zip Code Michael Minton 2513 South Indian River Drive Fort Pierce, FL 34950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dean, Mead, Minton & Klein Occupation Attorney Aggregate Year-to-Date -> 464.53	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Shirley Minton 2501 S. Indian River Dr. Fort Pierce, FL 34950- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code James Mintz 545 West End Ave., APT. 11-B New York, NY 10024- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer James Mintz Group, Inc. Occupation Private Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/28/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Blake Miraglia 2725 Yuma Court Walnut Creek, CA 94598- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer First Cash Financial Services Occupation President, Software Division Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code David Mishael 8603 South Dixie Highway, Suite 315 Miami, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	3,714.53
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002

 12614
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michael Mitrione 5654 High Flyer Rd., East West Palm Beach, FL 33418- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gunster Yoakley et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Charles Modica P.O. Box 3947 Boynton Beach, FL 33424-3947 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Barry University Occupation Chairman of the Board Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code H. Lee Moffitt 4230 South Macdill Ave Suite J Tampa, FL 33611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Richard Mondre 1505 NW 167th Street Miami, FL 33169- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Precision Response Corp. Occupation Account Executive Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Richard Mondre 1505 NW 167th Street Miami, FL 33169- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Precision Response Corp. Occupation Account Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Mario Monello 16A Buttonwood Lane Rumson, NJ 07760- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer CIBC World Markets Occupation Managing Director Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Mitchell R. Montgomery 9440 Phillips Highway, Ste 9 Jacksonville, FL 32256-1339 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Montgomery Land Company Occupation Developer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00 MEMO

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112015

Indicate schedule(s) and category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Mitchell R. Montgomery 9440 Phillips Highway, Ste 9 Jacksonville, FL 32256-1339 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Montgomery Land Company Occupation Developer Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/17/2000 Florida 2000	Amount of Each Receipt this Period 1,000.00 MEMO
B. Full Name, Mailing Address and Zip Code Mary Montgomery 1800 South Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Robert Montgomery P.O. Drawer 3086 West Palm Beach, FL 33402-3086 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Montgomery & Larmoyeux Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Alan Moore PO Box 711 Pensacola, FL 32593 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Insurance Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Gary Morris 14124 Greentree Drive Wellington, FL 33414 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code R. Larry Morris 4045 Connell Drive Pensacola, FL 32503- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Albert Morrison 12605 SW. 65th AVE. Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Morrison, Brown, Argiz Occupation Public Accountant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112646	First page schedule(s) for each category of the Detailed Summary Page	PAGE 100 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code William Morrison 315 Solando Prado Miami, FL 33156-2353 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Michael Moskowitz 800 Corporate Dr., Ste. 510 Ft. Lauderdale, FL 33334 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Moscovitz, Mandell, Salim et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code James Motta 2399 N. E. 28th Street Pompano Beach, FL 33064- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Clifford Mowe PO Box 12591 Pensacola, FL 32574- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mo-Money Corp. Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Lee Munder 1029 N. Ocean Boulevard Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code William Murphy 800 Riveria Is. Fort Lauderdale, FL 33301-2622 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Douglas Management Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Kenneth Murrah 1601 Legion Drive Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Murrah, Doyle and Wigle Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	4,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

200201-12617

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jeffrey Mutnik One SE Third Ave., 15th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accountant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Elizabeth Nance 525 N. Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Elizabeth Nance 525 N. Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code James Nance 525 N. Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nance, Cacciatore, Sisserson Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code James Nance 525 North Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nance, Cacciatore, Sisserson Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code James Nance 525 North Harbour City Blvd. Melbourne, FL 32935- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nance, Cacciatore, Sisserson Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Pat Natalizio 801 Maple Dr. Pompano Beach, FL 33063- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Certex Occupation Manager Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020728
 Which schedule(s) does this receipt fall under?
 Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Joy Naylor 1607 South Lakeshore Dr. Sarasota, FL 34231- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Volunteer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Andrew Needle 1401 Brickell Ave., Suite 900 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Needle Gallagher & Ellenberg Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Neill's Farm Fresh P Mr. David Neill P.O. Box 2547 Fort Pierce, FL 34954- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed/not a corporatio Occupation Agriculture Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/24/2000	Amount of Each Receipt this Period 300.00
D. Full Name, Mailing Address and Zip Code Charles L. Nelson P.O. Box 372368 Satellite Beach, FL 32937- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Jack Nelson 531 Manor Rd. Maitland, FL 32751- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Financial Planner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Margaret P. Nelson 18 Marina Isles Boulevard Indian Harbour Beach, FL 32937- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Clara Nenezian 7000 Aberdeen Way Miami Lakes, FL 33014- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002 112610

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code George Nenezian 7000 Aberdeen Way Miami Lakes, FL 33014- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Nenezian & Associates Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Arnold Newberger 950 North Michigan Ave. #4106 Chicago, IL 60611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Douglas Newkirk 1385 Atlantic City #319 Grover Beach, CA 93433 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000 Earmarked Move On	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Brian Newman 2030 Laurel Street Tallahassee, FL 32303- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pennington, Moore, Wilkinson Occupation Attorney Aggregate Year-to-Date -> 200.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 200.00
F. Full Name, Mailing Address and Zip Code Letty May Newman P.O. Box 49197 Sarasota, FL 34230-6197 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Robert Newman 19724 NE 24th Court Miami, FL 33180-2364 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002 112000	Use appropriate schedule(s) for category of the Detailed Summary Page	PAGE 104 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code John Niles P.O. Box 7 Longboat Key, FL 34228-0007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Date (month, day, year) 02/25/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Hubert Normile 1316 S. Riverside Dr. Indialantic, FL 32903 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Date (month, day, year) 03/10/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Lynn Normile 1316 S. Riverside Dr. Indialantic, FL 32903- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/10/2000 Aggregate Year-to-Date -> 750.00	Amount of Each Receipt this Period 750.00
D. Full Name, Mailing Address and Zip Code Mark Nuccilli 710 Southeast 8th Street Delray Beach, FL 33483- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Willard Brothers Construction Occupation Carpentry Construction Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Jeanne Nunn 1111 N. Gulf Stream Ave., 17-A Sarasota, FL 34236-5531 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/08/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Wesley O'Brien 17849 Fieldbrook Circle Boca Raton, FL 33496- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Wesley O'Brien 17849 Fieldbrook Circle Boca Raton, FL 33496- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,500.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002071202

 Attach schedule(s)
for category of the
Detailed Summary Page

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FOR LINE NUMBER
11(a) (i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Paul O'Hara 430 Coral Way Fort Lauderdale, FL 33301- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Paul O'Hara 430 Coral Way Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Edward O'Hare 936 Gatewood Ct. Atlanta, GA 30327- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assurant Group Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Felix O'Ryan 5050 Westshore Drive New Port Richey, FL 34652- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Michael Olin 7272 SW 102nd St. Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Jo Ann Oreffice P.O. Box 6134 Lake Tahoe, NV 89449- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Paul Oreffice P.O. Box 6134 Lake Tahoe, NV 89449- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002 112022

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Judson Orrick 650 Apalachee Parkway Tallahassee, FL 32399-2300 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Florida Bar Occupation Editor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Sally Osherow 433 Plaza Real, #365 Boca Raton, FL 33432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/09/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Shepard Osherow 433 Plaza Real, #365 Boca Raton, FL 33432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/09/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Richard Ottinger 818 The Crescent Mamaroneck, NY 10543-4532 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pace University Occupation Professor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code PRN Real Estate Ms. Nancy A. Rossman 6355 MetroWest Blvd., Suite 330 Orlando, FL 32835- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/17/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Louise Pajcic 2600 Orchard St. Jacksonville, FL 32254- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Florida 2000	Amount of Each Receipt this Period 1,000.00 MEMO
G. Full Name, Mailing Address and Zip Code Sallyn Pajcic 1900 Independent Square, #1900 Jacksonville, FL 32202- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Florida 2000	Amount of Each Receipt this Period 1,000.00 MEMO

SUBTOTAL of Receipts This Page (optional)

2,250.00

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code David Parker 930 Castile Ave. Miami, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Interprise Technology Partners Occupation Managing Principal Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Darryl Parmenter 501 Brickell Key Dr., #509 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Parmenter Company Occupation President & CEO Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code William Partridge 7624 Westmoreland Dr. Sarasota, FL 34243-1938 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Grossman Roth & Partridge Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Howard Paster 4935 Linnean Ave., NW Washington, DC 20008- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hill & Knowlton Occupation Chairman & CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/11/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Robert Paulk 1635 SW 4th Ave. Boca Raton, FL 33432- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Arlene Pecora 3260 Paddock Road Weston, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Arlene Pecora 3260 Paddock Road Weston, FL 33331- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00

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5,750.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Judy Perlin 7796 Mandarin Dr. Boca Raton, FL 33433-7424 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Riverwood Schools Occupation Owner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Sidney Pertnoy 13003 SW 104th Ct. Miami, FL 33176-5503 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pertnoy Solowsky Allen et al Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Joel Perwin 3435 N. Meridian ave. Miami Beach, FL 33140- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Podhurst & Orseck Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Marian Peters 165 North Sandy Hook Rd. Sarasota, FL 34242- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Grimmy, Inc. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/07/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Jan Petri 1845 23rd Avenue Vero Beach, FL 32960- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 300.00
F. Full Name, Mailing Address and Zip Code Bernard Pettingill 1 Carlisle Court West Palm Beach, FL 33418- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Diane C. Phillips 5911 NW 58th Terrace Pompano Beach, FL 33067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Strategic Technologies Occupation Public Adjuster Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,550.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Diane C. Phillips 5911 NW 58th Terrace Pompano Beach, FL 33067- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Strategic Technologies Occupation Public Adjuster Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Dale Pincourt 1270 N. Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Private Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Kenneth Pincourt 1270 N. Lake Way Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Todhunter International, Inc. Occupation Chairman & CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/18/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Vito Pitta 305 West 44th Street New York, NY 10036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Richard Pollack 6435 SW 122nd Street Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accounting Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Neale Poller 550 Biltmore Way, #700 Coral Gables, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Camner, Lipsitz Occupation Attorney Aggregate Year-to-Date -> 350.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 350.00
G. Full Name, Mailing Address and Zip Code Robert Pollock 150 Columbus Ave., Apt 5A New York, NY 10023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fortis, Inc. Occupation Chief Financial Officer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00

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5,600.00

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20020412820

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Harlan Pomeroy 7336 Villa Deste Dr. Sarasota, FL 34238-5648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code S. Ponce 1200 Brickell Avenue-Ste 1720 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wallace Bauman Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code S. Ponce 1200 Brickell Avenue-Ste 1720 Miami, FL 33131- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wallace Bauman Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Jocelyn Poole 12301 Moss Ranch Road Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Papy & Weissenlorn Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Shari Pordes 3802 NE 207 Street, Apt. TH2 Aventura, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/28/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Leman Porter 202 Quayside Circle, #204 Maitland, FL 32751- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lowndes, Drosdick, et. al. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Leman Porter 202 Quayside Circle, #204 Maitland, FL 32751- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lowndes, Drosdick, et. al. Occupation Attorney Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00

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4,250.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Alan Potamkin 1 Casuarina Concourse Coral Gables, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Powell, Godstein, Frazer & Mur Occupation CEO Date (month, day, year) 02/08/2000 Florida 2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00 MEMO
B. Full Name, Mailing Address and Zip Code Alan Potamkin 1 Casuarina Concourse Coral Gables, FL 33143- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Powell, Godstein, Frazer & Mur Occupation CEO Date (month, day, year) 02/08/2000 Florida 2000 Aggregate Year-to-Date -> 2,000.00	Amount of Each Receipt this Period 1,000.00 MEMO
C. Full Name, Mailing Address and Zip Code Carol Poteat-Buchanan 5346 Everwood Run Sarasota, FL 34235-4600 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/07/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Chance Powell 17024 SW 80th Court Miami, FL 33157- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Date (month, day, year) 02/27/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Earl Powell 8221 SW 183rd St. Miami, FL 33157- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Yachting Promotions Inc. Occupation Sales Date (month, day, year) 02/27/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Stanley Prager 866 S. Dixie Highway Miami, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code David Pratt 115 Little Rest Road Kingston, RI 02881- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Date (month, day, year) 01/14/2000 Florida 2000 Aggregate Year-to-Date -> 25.00	Amount of Each Receipt this Period 25.00 MEMO

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2,500.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Thomas Prescott 1831 Biltmore St., NW #8 Washington, DC 20009-1903 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer USIA Occupation Director, LAO-FAS Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Thomas Prescott 1831 Biltmore St., NW #8 Washington, DC 20009-1903 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer USIA Occupation Director, LAO-FAS Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Richard Preston 19472 - 38th Court Golden Beach, FL 33160- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gerson, Preston & Company, PA Occupation CPA Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Mark Price 1441 Tagus Avenue Coral Gables, FL 33156 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schwab One Occupation Health Care Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Mark Proctor 115 Shoreline Drive Gulf Breeze, FL 32561- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Deenya Rabiuss 739 South N Street Livermore, CA 94550 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lexxis Solutions, Inc. Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 500.00 Earmarked Move On
G. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) Amount of Each Receipt this Period

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4,500.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Troy Rafferty 2321 Oxford Drive Pensacola, FL 32503- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Troy Rafferty 2321 Oxford Drive Pensacola, FL 32503- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levin Middlebrooks Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code David Ranck 410 Jillotus St. Merritt Island, FL 32952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Engineer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code David Ranck 410 Jillotus St. Merritt Island, FL 32952- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Engineer Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Tina Ranck 410 Jillotus St. Merritt Island, FL 32952- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Group Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Tina Ranck 410 Jillotus St. Merritt Island, FL 32952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Group Occupation Executive Aggregate Year-to-Date -> 1,850.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 850.00
G. Full Name, Mailing Address and Zip Code Tina Ranck 410 Jillotus St. Merritt Island, FL 32952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Group Occupation Executive Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Jerry Ray 24445 Moss Creek Lane Ponte Vedra Beach, FL 32082- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The St. Joe Company Occupation Paper - VP Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Mark Raymond 201 S. Biscayne Blvd 26th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Caroline Reed 16 Kennelworth Terrace Greenwich, CT 06830- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation investment banker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Frederick Reeves 8818 Crescent Forest Blvd. New Port Richey, FL 34654 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hobby, Grey & Reeves Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Geraldine Reich 6765 Casa Grande Way Delray Beach, FL 33446- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/07/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code William Reid 1045 Ffith Ave., 5th FLR New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lansdown Capital Occupation Sr. Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Joseph Reiter P.O. Box 4056 West Palm Beach, FL 33402- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Lytal & Reiter Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

200201203	The filer must complete schedule(s) for each category of the Detailed Summary Page	PAGE 115 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Charles Rennert 156 Bal Cross Drive Bal Harbour, FL 33154 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berman Wolfe & Rennert Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Larry Rentz 1000 Brickell Ave., Suite 1200 Miami, FL 33131-3014 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Allen Morris Company Occupation Real estate Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Gary Reshefsky 1280 S. Alahambra Cir. No. 1321 Miami, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation City of Miami Comm. Staff Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Rebecca Reshefsky 571615 Arbor Club Way Boca Raton, FL 33433- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Student Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Ronald Reshefsky 7842 Afton Villa Court Boca Raton, FL 33433 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Health Care Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code James Resnick 2501 Bay Ave. Sunset Island, #2 Miami Beach, FL 33140- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Resnick & Company Occupation Real Estate Developer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Clifford Reuter 517 Camellia Ln. Vero Beach, FL 32963- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Genealogist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112002

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Honey Revitz 40665 NE Quaylebridge Court Miami, FL 33138- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/08/2000 Florida 2000	Amount of Each Receipt this Period 1,000.00 MEMO
B. Full Name, Mailing Address and Zip Code David Rhudy 166 White Oak Shade Road New Canaan, CT 06840-6831 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Salomon Smith Barney Occupation Broker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Eugene Ribakoff 44 Cocoonut Row, Regency II Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Automotive Management Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Eugene Ribakoff 44 Cocoonut Row, Regency II Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Automotive Management Occupation Chairman Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Rogelio Ribas 3829 SW 99th Ave., 6 Miami, FL 33165- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Gwen Rich 1415 Lancaster Dr. Orlando, FL 32806- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Jonathon Rich 200 S. Orange Ave. Ste. 3000 Orlando, FL 32801- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

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

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Wayne Rich P.O. Box 1911 Orlando, FL 32802- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Richard Richman 599 W. Putnam Ave Greenwich, CT 06830- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Richman Group Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Robert Rider 1121 Morvenwood Road Jacksonville, FL 32207-5350 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Stephen Riemer 20143 NE 19th Pl. N. Miami Beach, FL 33179 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Tri-County Insurance Agency Occupation Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Robert Riesman 140 Freeman Parkway Providence, RI 02906- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Michael Riley 4900 N. Ocean Blvd., #508 Fort Lauderdale, FL 33308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Health Care Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Thomas Ringel 6732 SW 139th St. Miami, FL 33158- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Markowitz Davis Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112004

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Buzz Ritchie Post Office Box 13401 Pensacola, FL 32591- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Sidney Robbins 4208 Marina Court Cortez, FL 34215- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Scott Robins 1800 W. 24 St. Miami, FL 33140- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Scott Robins Companies Occupation Real estate Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code James Robinson 20815 Pinar Trail Boca Raton, FL 33433- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Gerson, Preston & Company, PA Occupation CPA Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Rafael Roca 107 Still Lake Dr. Jupiter, FL 33458- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Roca & Sharpe Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Diana Rodriguez 2169 NE 63rd St. Fort Lauderdale, FL 33308- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Political Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Jose Rodriguez 2240 Palm Beach Lakes Blvd., #200 West Palm Beach, FL 33409- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112035

Use this schedule (a) for category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Thomas Rogan P.O. Box 52-5100 Miami, FL 33152-8041 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Jardine MacNeill Occupation Managing Gen. Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/28/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Paul Rogers 555 - 13th St., NW Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hogan & Hartson LLP Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Robert Rogers 5055 South Flagler Drive Suite 1B30 West Palm Beach, FL 33401- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers Bowers & Dempsey Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Samuel Rogers PO Box 12099 Tallahassee, FL 32317 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Atkins, Gunter & Assoc Occupation Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Alan Rolnick 1145 N. Biscayne Point Road Miami, FL 33141- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hanzman Criden etc. Occupation Lawyer Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Walter T. Rose PO Box 321255 Cocoa Beach, FL 32932-1255 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State of Florida Occupation County Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Baylie Rosenberg 125 Chateaux Dr. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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20020112000

1st page schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Henry Rosenberg 723 Seventh Ave., 7th Floor New York, NY 10019- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Stuart Rosenfeldt 201 SW 8th Terrace Boca Raton, FL 33486- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Phillips, Eisenger Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Gary Rosenthal 10080 SW 143rd Street Miami, FL 33176 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accounting Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Lorraine Ross 16800 Gulf Blvd., #12 Redington Beach, FL 33708- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Intech Consulting Company Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Stephen Rossman 5340 Banyan Dr. Miami, FL 33158- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rossman, Baumberger & Reboso Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Lisa Rost 1713 Lakeshore Dr. Orlando, FL 32803- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Lisa Rost 1713 Lakeshore Dr. Orlando, FL 32803- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112637

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Scott Rost 641 N. Adelle Ave. De Land, FL 32720 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Doran & Wolfe Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Scott Rost 641 N. Adelle Ave. De Land, FL 32720 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Doran & Wolfe Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Alexander B. Rotbart 5434 Grand Park Place Boca Raton, FL 33486- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rotbart & Deutsch Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Vicki Roth Grand Bay Plaza 2665 S. Bayshore Dr., PH1 Coconut Grove, FL 33133- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Roger Rovell 108 31st Avenue Saint Petersburg, FL 33706- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kalish & Ward, P.A. Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Marc Rowan 944 Park Ave. Apt. 15F New York, NY 10028- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Mary-Paige Royer 90 Druid Hill Rd. Summit, NJ 07901- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kean University Occupation Professor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5,500.00

SCHEDULE A

ITEMIZED RECEIPTS

20020112000

 Attach schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Ivor Rozowsky 14330 Cypress Island Ct. Palm Beach Gardens, FL 33410-1007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer VirtualBank Occupation Chief Financial Officer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/06/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Jay Rubin 745 Westerly Parkway State College, PA 16801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 450.00	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 450.00
C. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Daniel Rudner 11361 NW 5th St. Plantation, FL 33325- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Student Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/11/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Daniel Rudner 11361 NW 5th St. Plantation, FL 33325- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Student Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/11/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Max Rudoler 305 Monmouth Dr. Cherry Hill, NJ 08002- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Metallurgist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Joseph Rugg 709 South Packwood Avenue Tampa, FL 33606- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Annis, Mitchell, Cockey, etc. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,200.00

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SCHEDULE A

ITEMIZED RECEIPTS

20020112000	Use this schedule(s) for category of the Detailed Summary Page	PAGE 123 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Anthony Ruggiero 4120 Staghorn Lane Weston, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer New York Life Occupation Agent Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Anthony Ruggiero 4120 Staghorn Lane Weston, FL 33331- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer New York Life Occupation Agent Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Taren Ruggiero 4120 Staghorn Lane Weston, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Taren Ruggiero 4120 Staghorn Lane Weston, FL 33331- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Domenic Ruscio 6100 Westchester Park Dr., #1012 College Park, MD 20740- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cavarocchi, Ruscio, Dennis Occupation Consultant Date (month, day, year) 03/03/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Don Rushing Post Office Box 711 Pensacola, FL 32593- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fisher Brown, Inc. Occupation Chairman Date (month, day, year) 03/29/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code D.L. Rutledge 641 Forest Lair Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Interior Designer Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002012040	Indicate schedule(s) for category of the Detailed Summary Page	PAGE 124 OF 157
		FOR LINE NUMBER 11(a)(i)

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)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Tammie Ryniewicz 3171 Sunset Beach Court Merritt Island, FL 32952 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Tammie Ryniewicz 3171 Sunset Beach Court Merritt Island, FL 32952 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Harold Sackeim 69 Crest Rd. Chappaqua, NY 10514- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Steven Sadaka 3040 Universal Blvd. #190 Weston, FL 33331- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Steven Douglas Associates Occupation President Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Steven Sadaka 3040 Universal Blvd. #190 Weston, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Steven Douglas Associates Occupation President Date (month, day, year) 03/30/2000 Aggregate Year-to-Date -> 1,500.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Alan Sagner 651 West Mt. Pleasant Ave., #220 Livingston, NJ 07039- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code David Sales 3323 S. Flager Dr. West Palm Beach, FL 33405- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Date (month, day, year) 02/18/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	3,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2001012004

 Attach schedule(s)
for category of the
Detailed Summary Page

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 FOR LINE NUMBER 11(a)(i)

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)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Ronald Sanchies 1 Master Circle Little Rock, AR 72212-3723 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Michael Sandler 13 Christopher Ave. Kendall Park, NJ 08824- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Veritly LLC Occupation President Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Aubrey Sarvis 3037 O Street, NW Washington, DC 20007- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/11/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code John Scarola 107 Schooner Lane Jupiter, FL 33477- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Bruce Scheiner P.O. Box 60049 Fort Myers, FL 33906-6049 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Mark Schnapp 1900 Sunset Harbour Dr., Apt. 2108 Miami Beach, FL 33139- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Charles Schneider 4616 Butterworth Pl. N.W. Washington, DC 20016- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412842

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Lewis Schott 220 Sunrise Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Private Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Richard Schuler 132 Spyglass Lane Jupiter, FL 33477- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Schuler & Halverson Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Terrence Schultz 22378 Boyaca Avenue Boca Raton, FL 33433 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accounting Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Marvin Schur 306 Atlantic Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Elaine Schuster 132 Yarmouth Rd. Chestnut Hill, MA 02167- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer City of Chestnut Hill Occupation Director of Community Affairs Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Gerald Schuster 2100 South Ocean Blvd. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Miriam Schwartz 120 Canterbury Lane Palm Beach, FL 33480-3601 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112049

 See page 1 of 1 for the schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Peter Schwedock 28 W. Flagler Street Suite 800 Miami, FL 33130 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Christian Searcy 2139 Palm Bch. Lakes Blvd. W. Palm Beach, FL 33409 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denny Scarola et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Christian Searcy 2139 Palm Bch. Lakes Blvd. W. Palm Beach, FL 33409 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denny Scarola et al Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Michelle Sebesta 4378 Mahogany Ridge Dr. Weston, FL 33331- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code William Segal 955 Stonewood Lane Maitland, FL 32751-3238 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Linda Serabian 11950 NW 6th St. Fort Lauderdale, FL 33325- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Subway Sandwich Shops Occupation Owner Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Stephen Sessums 4805 Bayshore Blvd. Tampa, FL 33611- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sessums, Mason & Black, P.A. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012644	Use the schedule's category of the Detailed Summary Page	PAGE 128 OF 157
		FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Robert Setrakian c/o The Helios Group 126 East 56th St., 15th Floor New York, NY 10022- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Helios Group Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Robert Shafer 24 North Market Street, Suite Jacksonville, FL 32202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 250.00 Earmarked Move On
C. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn,Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Chaim Shapiro 4006 Wolverton A Boca Raton, FL 33434- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Rabbi Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Steven Shapiro 230 Pendelton Ave. Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sherwood Associates Occupation Financial Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Lawrence Share 1200 South Pine Island Rd. Suite 400 Plantation, FL 33324 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Tracy Sharpe 15 Harbor Dr. Lake Worth, FL 33460- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Roca & Sharpe Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002042845

 Schedule (a)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Scott Sheftall 100 Se. Second St. Ste. 4600 Miami, FL 33131-1101 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sheftall Alvarez & Torres Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Roberta Shevin 515 Perugia Ave. Coral Gables, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Roberta Shevin 515 Perugia Ave. Coral Gables, FL 33146- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Frank Shewer 455 Longboat Club Rd., #708 Longboat Key, FL 34228- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Robert Shimberg 3212 W. Fountain Blvd. Tampa, FL 33609- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hill, Ward & Henderson, P.A. Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Robert Shinn 1420 Elizabeth Dr. Winter Park, FL 32789- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The St. Joe Company Occupation Hospitality/President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code John Shipley 1210 Vista Del Mar Delray Beach, FL 33444- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112040	State schedule(s) for category of the Detailed Summary Page	PAGE 130	OF 157
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michelle Shugar 290 Helen Street Perry, FL 32347- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Date (month, day, year) 03/29/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Shula's Steak House, L.P. (Partnership) 6843 Main Street Miami Lakes, FL 33014- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation restaurateur Date (month, day, year) 02/08/2000 Florida 2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.09 MEMO
C. Full Name, Mailing Address and Zip Code Peter Sidoti 317 Madison Ave. New York, NY 10017- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sidoti & Co. Occupation Research Analyst Date (month, day, year) 02/22/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Joseph Silva 11590 SW 25th St. Fort Lauderdale, FL 33325- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer J.F. Silva Construction Occupation Carpentry Contractor Date (month, day, year) 03/31/2000 Aggregate Year-to-Date -> 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Arthur Silverman 11020 Piney Meeting House Road Potomac, MD 20854- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Dutko Group Occupation General Counsel Date (month, day, year) 03/22/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Marc Silverman 5770 SW 128th St. Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Silverman Financial, Inc. Occupation President Date (month, day, year) 02/29/2000 Aggregate Year-to-Date -> 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Laurie Silvers 2225 Glades Rd., Suite 237W Boca Raton, FL 33431-7383 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hollywood.com Occupation President Date (month, day, year) 02/28/2000 Aggregate Year-to-Date -> 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012847	Page schedule(s) for category of the Detailed Summary Page	PAGE OF 131 157
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Laurie Silvers 2225 Glades Rd., Suite 237W Boca Raton, FL 33431-7383 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hollywood.com Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/28/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Simon Simkovic 232 Seybold Bldg. Miami, FL 33132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Continental Jewellers Occupation jeweler Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Elliott Singer 3971 Gulf Shore Blvd., N., No. 903 Naples, FL 34103- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Rita Singer 11 Alsld Court Troy, NY 12180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/20/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code John Sisson 819 E. Park Avenue, #11 Tallahassee, FL 32301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/20/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Richard Slawson 2401 PGA Blvd., Suite 140 Palm Beach Gardens, FL 33410- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Slawson & Cunningham Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Nathan Slewett 9240 W. Bay Harbor Dr., Apt. 5A Bay Harbour, FL 33154- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer National Parkinson Foundation Occupation Chairman of the Board Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/23/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

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SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full) Bill Nelson for U.S. Senate Campaign Committee			
A. Full Name, Mailing Address and Zip Code Peter Slone 1221 Tottenham Court Reston, VA 20194-1417 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Black Kelly Scruggs & Healey Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Bruce Slovin 42 East 65th St. New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Revlon, Inc. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Henry Smallwood 109 Wescott Cir. Port Saint Joe, FL 32456- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Joe Timberland Co. Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Alexandra Smigiel 1020 S. Lakeside Dr. Lake Worth, FL 33460- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Alicia Smith 1401 K. Street NW, Suite 1200 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Smith Free Group Occupation Senior Vice President Aggregate Year-to-Date -> 486.60	Date (month, day, year) 03/30/2000 Event Expense	Amount of Each Receipt this Period 486.60 IN-KIND
F. Full Name, Mailing Address and Zip Code Gerald Smith 7314 Floranada Way Delray Beach, FL 33446- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Viragen Occupation Member of Company Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Kevin Smith 570 Arvida Parkway Miami, FL 33156-2321 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Syntheon, LLC Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/18/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	5,236.60
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002

 11-2849
 Use this schedule (a)
 for each category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Kimberly Smith 570 Arvida Parkway Miami, FL 33156-2321 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/18/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Thomas Smith 3195 Ponce De Leon Blvd., Suite 300 Coral Gables, FL 33134- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Christopher Smithers 232 Angler Ave. Palm Beach, FL 33480-3104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Diane Snowden 10613 Charleston Dr. Vero Beach, FL 32963- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Falls Creek Farm, Inc. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Diane Snowden 10613 Charleston Dr. Vero Beach, FL 32963- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Falls Creek Farm, Inc. Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Guy Snowden 10613 Charleston Dr. Vero Beach, FL 32963- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Snowmark Corporation Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Guy Snowden 10613 Charleston Dr. Vero Beach, FL 32963- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Snowmark Corporation Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112650

 Attach schedule(s)
for category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Stephen Solomon 24477 Harbour View Drive Ponte Vedra Beach, FL 32082- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Jean Soman 9000 Arvida Dr. Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Writer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Michael Sonnenfeldt 1995 Broadway 16th Floor New York, NY 10023- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/14/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Richard Spears 9132 Ridge Pine Trail Orlando, FL 32819-4822 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/14/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Christopher Speed 146 Commodore Dr. Jupiter, FL 33477- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Leonard Spielvogel 101 S. Courtenay Parkway Merritt Island, FL 32952- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Dean Mead Spielvogel et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Rebecca Spooner 3799 NE 6th Dr. Boca Raton, FL 33431- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112051	Attach schedule(s) for category of the Detailed Summary Page	PAGE 135 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Rebecca Spooner 3799 NE 6th Dr. Boca Raton, FL 33431-	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code Steven Sprechman 18305 Biscayne Blvd. #213 Miami, FL 33160-2172	Name of Employer Sprechman & Associates, P.A. Occupation Attorney	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code John Stafford 7652 Sandalwood Way Sarasota, FL 34231-	Name of Employer SunTrust Occupation Banker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
D. Full Name, Mailing Address and Zip Code Josephine Stayman 2500 South Ocean Blvd., Apt. 105 Palm Beach, FL 33480-	Name of Employer No Employer Occupation Homemaker	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
E. Full Name, Mailing Address and Zip Code Craig Stein 900 Bay Drive #324 Miami, FL 33141-	Name of Employer Winikoff Stein Rosenberg Occupation Attorney	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code Michael Stein 148 El Mirasol Palm Beach, FL 33480-	Name of Employer Retired Occupation Retired	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
G. Full Name, Mailing Address and Zip Code Dawn Steinberg 3140 N. 36th St. Hollywood, FL 33021-	Name of Employer Key Healthcare Management Occupation President	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

112652
List date schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Edward Steinberg 100 Sunrise Ave., #311 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Optometrist Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Meyer Steinberg 475 Fifth Ave., Suite 1200 New York, NY 10017- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Enterprise Asset Management Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code David Steiner Llewellen Park West Orange, NJ 07052- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Steiner Equities Occupation Real estate Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Sylvia Steiner 75 Eisenhower Parkway Roseland, NJ 07068- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Florence Stern 2013 Fisher Island Drive Miami, FL 33109- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Larry Stewart 1 SE 3rd Ave., Ste. 3000 Miami, FL 33131 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Stewart Tilghman Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Larry Stewart 1 SE 3rd Ave., Ste. 3000 Miami, FL 33131 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Stewart Tilghman Occupation Attorney Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

6,000.00

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SCHEDULE A

ITEMIZED RECEIPTS

20020412653

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Pat Stewart 1 SE 3rd Ave., Suite ,# 3000 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Walter Stewart 621 East Capitol St., SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Griffin, Johnson, & Dover Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Donald Stitzenberg 600 Harbor Blvd., Unit 1043 Union City, NJ 07087- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Merial Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Susan Stoltz P.O. Box 4630 Wilmington, DE 19807- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Charles Stottlemeyer 340 Palm Ave., Apt. 103 Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Kenneth Strauss One SE Third Ave., 15th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accountant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Kenneth Strauss One SE Third Ave., 15th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accountant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

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ITEMIZED RECEIPTS

2002012854

Indicate schedule(s) or category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Caroline Strickland 46 N Washington Blvd Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Livingston, Patterson, et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/12/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code John Strickland 46 N. Washington Boulevard Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Livingston, Patterson, Strickl Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/07/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Edward Strongin 12720 S.W. 116th Street Miami, FL 33186 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Symbiont Partners Occupation Auditor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Warren Struhl 21 Chestnut Ct. Englewood, NJ 07631- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer TWS Partnership Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Amancio Suarez 16501 NW 16th Court Miami, FL 33169- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cosmo Communications Occupation Owner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/14/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Jesse Suber 1015 East 7th Ave. Tallahassee, FL 32303-5801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Henry, Buchanan, Hudson, Suber Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 300.00
G. Full Name, Mailing Address and Zip Code Stephen Swartz 187 Bridle Way Ponte Vedra Beach, FL 32082- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The St. Joe Company Occupation Vice President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,050.00

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Walter Sweeting 1525 SW 101st Way, #303 Pembroke Pines, FL 33025- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Developer Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Kent Swig c/o Brown Harris Stevens 770 Lexington Ave. New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Brown Harris Stevens Occupation Partner Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/23/2000 Amount of Each Receipt this Period 750.00
C. Full Name, Mailing Address and Zip Code Ralph Symons 7100 Lago Drive West Coral Gables, FL 33143 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ralph W. Symons, P.A. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Robin Symons 7100 Lago Drive West Coral Gables, FL 33143 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Elser, Moskowitz, Edelman Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Dalton Tate 7150 Ox Bow Rd. Tallahassee, FL 32312 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Capital Insurance Agency Occupation Agent Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Bobbie Taub 4937 Lyford Cay Rd. Tampa, FL 33629-4828 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Theodore Taub 4937 Lyford Cay Rd. Tampa, FL 33629-4828 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112050

(If not a Schedule A receipt, attach Schedule A receipt) For Category of the Detailed Summary Page	PAGE 140 OF 157 FOR LINE NUMBER 11(a)(i)
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Toni Teague PO Box 1494 Cocoa, FL 32923 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Buchanan Group Occupation Comptroller Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Catherine Tekle-Haimanot 819 N. Alzadena Dr. Pasadena, CA 91107- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Girmay Tekle-Haimanot 819 N. Alzadena Dr. Pasadena, CA 91107- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Troy Templeton 7361 SW 167th St. Miami, FL 33157- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Trivest, Inc. Occupation Equities Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Beverly Tenen 6347 SW 9th Street Miami, FL 33144- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Karen Terry 250 Bradley Place, # 509 Palm Beach, FL 33480-3756 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code William Terry 7601 SW 139th St. Miami, FL 33158- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

200204/2857	Use this schedule (a) for category of the Detailed Summary Page	PAGE 141 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Kirby J. Thagard 502 North Ride Tallahassee, FL 32303- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code The Ickes & Enright Group Mr. Harold Ickes & Ms. Janice Enright 1300 Connecticut Ave. NW, Suite 600 Washington, DC 20036- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code The Ickes & Enright Group Mr. Harold Ickes & Ms. Janice Enright 1300 Connecticut Ave. NW, Suite 600 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code The Tamara Peacock C Ms. Tamara Peacock 301 E. Las Olas Blvd Fort Lauderdale, FL 33301- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Architect Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code John Pat Thomas P.O. Box 1919 Quincy, FL 32353-1919 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pat Thomas & Associates Occupation Vice President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Marjorie Thomas P.O. Box 865 Orlando, FL 32802- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ivanhoe Broadcast News Occupation Owner Aggregate Year-to-Date -> 900.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 900.00
G. Full Name, Mailing Address and Zip Code Peter Thomas 3903 Thornapple St. Chevy Chase, MD 20815- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Powers Pyles Sutter Occupation Partner Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/03/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112858

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Charles Thompson 1301 Riverplace Boulevard, #2130 Jacksonville, FL 32207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Securities Broker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/17/2000 Florida 2000 Amount of Each Receipt this Period 1,000.00 MEMO
B. Full Name, Mailing Address and Zip Code Laurie Thompson 701 Brickell Avenue Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date -> 150.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 150.00
C. Full Name, Mailing Address and Zip Code Charles Throckmorton 10005 SW 63rd Place Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Throckmorton Kozyak Tropin Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code John Tidona 412 Lock Road Apt 43 Deerfield Beach, FL 33442- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 01/25/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Bill Tillet 10905 Snapper Creek Rd. Miami, FL 33156-3460 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Maplewood Partners Occupation Principal Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Andrew Tisch 667 Madison Ave New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Loews Corporation Occupation Chairman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Jonathan Tisch 655 Madison Ave., 8th Floor New York, NY 10021-8043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Loews Hotels Occupation CEO Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112050

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Ann Toffoli 102 Spring Lake Lane Altamonte Springs, FL 32714- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Ann Toffoli 102 Spring Lake Lane Altamonte Springs, FL 32714- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Michael Tonelli 201 East Kennedy Blvd. Suite 1750 Tampa, FL 33602- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Barr Murman & Tonelli Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Jeffrey Trammell 4334 P. St. NW Washington, DC 20007- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hill & Knowlton Occupation Senior Managing Director Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/11/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Kay Trammell 4638 Bales Drive Marianna, FL 32446- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Harley Tropin 5845 SW 93rd Street Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kozyak Tropin & Throckmorton Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/14/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Harley Tropin 5845 SW 93rd Street Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Kozyak Tropin & Throckmorton Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

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SCHEDULE A

ITEMIZED RECEIPTS

2002 112660

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code David True 1059 Carambola Circle West Palm Beach, FL 33406- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Administrator Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Donna True 1059 Carambola Circle West Palm Beach, FL 33406- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer JF & C5 Occupation Social Worker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Julius Trump 4000 Island Blvd Williams Island Aventura, FL 33160- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/01/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Julius Trump 4000 Island Blvd Williams Island Aventura, FL 33160- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 02/01/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Candis Trusty 1717 North Bayshore Dr. Condominium 1246 Miami, FL 33132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ringel Markowitz Davis Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Guy Trusty 1717 N. Bayshore Dr., #1246 Miami, FL 33132- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Investor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Mark Tucker 3866 Moriarity Court Tallahassee, FL 32308 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/24/2000 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112884

 Attach schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Nadia Tucker 3866 Moriarity Court Tallahassee, FL 32308 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Legal Secretary Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/24/2000	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Austin Tupler 6570 SW 47th Court Davie, FL 33314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Tupler Trucking Occupation President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code M. Stephen Turner P.O. Box 10261 Tallahassee, FL 32302- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 800.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code M. Stephen Turner P.O. Box 10261 Tallahassee, FL 32302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Broad & Cassel Occupation Attorney Aggregate Year-to-Date -> 1,300.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Susan Turner P.O. Box 10261 Tallahassee, FL 32303- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Kevin Twomey 3510 Sunnyside Dr. Jacksonville, FL 32207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer St. Joe Company Occupation President Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Tracy Upchurch 398 Old Quarry Rd. Saint Augustine, FL 32084- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Upchurch, Bailey and Upchurch Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

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ITEMIZED RECEIPTS

20020112662

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Alexander Valdes 9970 SW 58th St. Miami, FL 33173- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Papers Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Alexander Valdes 9970 SW 58th St. Miami, FL 33173- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Papers Occupation Partner Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Francisco Valdes 8110 SW 34th St. Miami, FL 33155- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Papers Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Francisco Valdes 8110 SW 34th St. Miami, FL 33155- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Papers Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Jesus Valdes 8100 SW 34th Street Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Papers Occupation Partner Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Jesus Valdes 8100 SW 34th Street Miami, FL 33156- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pan American Papers Occupation Partner Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/26/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Carlos Valdesuso 13951 SW 66th St., Apt. 520A Miami, FL 33183- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

7,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112000

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Peter Vandenberg 6660 SW 100th Street Miami, FL 33156-3356 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Trivest, Inc. Occupation Equities Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Howard Vogel 2127 Brickell Ave. APT. 1002 Miami, FL 33129-2142 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berman Wolfe & Rennert Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Todd Vraspir 9331 Tooke Shore Drive Brooksville, FL 34614 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Papy & Weissenlorn Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 300.00
D. Full Name, Mailing Address and Zip Code Bill Wagner 901 Mariner Way Tampa, FL 33602- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wagner, Vaughn & McLaughlin Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Ward Wagner 1753 Flagler Manor Circle West Palm Beach, FL 33411- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wagner, Johnson et al Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code Harriet Wall Post Office Box 207 Old Town, FL 32680- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employed Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Harriet Wall Post Office Box 207 Old Town, FL 32680- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employed Occupation Homemaker Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112004

 Attach schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Kevin Wall Post Office Box 207 Old Town, FL 32680- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Anderson Columbia, Inc. Occupation Foreman Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Rolfe Wall Post Office Box 207, US Hwy. 19 Old Town, FL 32680- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Anderson Mining Occupation Plant Manager Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Rolfe Wall Post Office Box 207, US Hwy. 19 Old Town, FL 32680- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Anderson Mining Occupation Plant Manager Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Milton Wallace 1200 Brickell Ave., suite 1720 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wallace, Bauman, Legan et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Edward Waller 3703 Palma Ceia Court Tampa, FL 33629- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fowler, White Gillen et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/27/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Michael Walts 24 East Beach Lagoon Rd. Hilton Head Island, SC 29928- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Check Cashing Service Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/07/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code John Ward 406 Cerromar Circle North Apt. 322 Venice, FL 34293- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer The Ward Insurance Agency Occupation Agent Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/24/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

Attach schedule(s) for category of the Detailed Summary Page	PAGE 149 OF 157
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Dorothy Warnell 770 S. Palm Ave., #1504 Sarasota, FL 34236- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/24/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code James Warring 446 Mohave Ter Lake Mary, FL 32746- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer HHEP Architects Occupation Architect Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code George Weaver 871 E. Commercial Boulevard Fort Lauderdale, FL 33334- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ranch, Weaver, Millsaps Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code Kathleen Weber 11730 SW 67th Ct. Miami, FL 33156- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Falcon Fire Protection, Inc. Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Kathleen Weber 11730 SW 67th Ct. Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Falcon Fire Protection, Inc. Occupation President Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code William Weber 11730 SW 67th Ct. Miami, FL 33156- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer William A. Weber, P.A. Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code William Weber 11730 SW 67th Ct. Miami, FL 33156- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer William A. Weber, P.A. Occupation Attorney Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

200204/2000

Indicate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Bruce Weil 5901 N. Bayshore Dr. Miami, FL 33137-2305 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Zack Kosnitzky P.A. Occupation Attorney Aggregate Year-to-Date -> 300.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 300.00
B. Full Name, Mailing Address and Zip Code Frank Weinstein 482 39th Av. East Seattle, WA 98112 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Concord Fabrics, Inc. N.y. Occupation Consultant Aggregate Year-to-Date -> 300.00	Date (month, day, year) 02/17/2000 Earmarked Move On	Amount of Each Receipt this Period 300.00
C. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through MoveOn, Org P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Mark Weinstein 2212 Alford Way Wellington, FL 33414- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/17/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Sherwood Weiser 3250 Mary St. Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer CRC Holdings, Inc. Occupation Vacation Resorts Aggregate Year-to-Date -> 500.00	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Sherwood Weiser 3250 Mary St. Miami, FL 33133- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer CRC Holdings, Inc. Occupation Vacation Resorts Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Mary Weiss 340 Brazilian Ave., #201 Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412887

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

NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Sheri Weissenborn 14620 S.W. 82nd Avenue Miami, FL 33158 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Papy Papy Weissenborn Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Robert Welsh Ashton Agency, Inc. 7129 University Blvd. Winter Park, FL 32792- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Ashton Agency, Inc. Occupation Surveyor Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and Zip Code Howard Wexler 965 River Overlook Court Atlanta, GA 30328- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assurant Group Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code David White 11666 Lost Tree Way North Palm Beach, FL 33408- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Searcy Denney Scarla et al Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code John Whiteman 32 Ocean Woods Drive Saint Augustine, FL 32084-7992 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Rogers, Towers, Bailey, Jones & Gay Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and Zip Code William Whitney 3215 E. Lakeshore Dr. Tallahassee, FL 32312 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pennington, Moore, Wilkinson Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Michael Widener 4041 North Central Suite 1100 Phoenix, AZ 85012- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> -1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period -1,000.00 Reattribution MEMO

SUBTOTAL of Receipts This Page (optional)

2,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002012668

Use this schedule (a) for category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Michael Widener 4041 North Central Suite 1100 Phoenix, AZ 85012- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 0.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Peggy Widener P.O. Box 40370 Phoenix, AZ 85067- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Reattribution	Amount of Each Receipt this Period 1,000.00 MEMO
C. Full Name, Mailing Address and Zip Code Krent Wieland 371 SE 11th Street Pompano Beach, FL 33060- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Landscape Architect Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Elliott Wiener 16440 Via Venetia E Delray Beach, FL 33484- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Levitt Homes, Inc. Occupation Corporate Executive Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Howard Wiener 6123 NW 31st Ave. Boca Raton, FL 33496- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Stephen Wilhoit 17056 Bay St. Jupiter, FL 33477- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer VirtualBank Occupation Vice President Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/06/2000	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Cathi Wilkinson 7273 Ox Bow Road Post Office Box 10095 Tallahassee, FL 32302- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,250.00

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SCHEDULE A

ITEMIZED RECEIPTS

2002012600	Indicate schedule(s) for category of the Detailed Summary Page	PAGE OF 153 157
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Myles Wilkinson 1319 Rockledge Dr. Rockledge, FL 32955- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Alan Willard 9660 W. Sample Road, Suite 301 Coral Springs, FL 33065- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Willard Brothers Construction Occupation Carpentry Contractor Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Ashbel C. Williams 11 Hunting Ridge Lane Wilton, CT 06897- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fir Tree Partners Occupation Agriculture Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00 MEMO
D. Full Name, Mailing Address and Zip Code Jeffrey Williams 1356 Churchill Way Marietta, GA 30062- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Assurant Group Occupation Vice President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000 Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code John Williams 3948 Rambling Acres Titusville, FL 32796-3644 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 150.00	Date (month, day, year) 03/10/2000 Amount of Each Receipt this Period 150.00
F. Full Name, Mailing Address and Zip Code Frank Williamson 9200 NE 12th Dr. Okeechobee, FL 34972- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Williamson Cattle Company Occupation Agriculture Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/23/2000 Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code William Wilson 1354 W. Ivanhoe Blvd. Orlando, FL 32804 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

3,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 154 OF 157
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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Harry Winderman 2000 S. Ocean Dr., #406 Fort Lauderdale, FL 33316-	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
B. Full Name, Mailing Address and Zip Code Barry Wish The Forum, Suite 1000 1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401-	Name of Employer Retired Occupation Retired	Date (month, day, year) 02/22/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
C. Full Name, Mailing Address and Zip Code Michael Wohl 2665 S. Bayshore Dr., #202 Coconut Grove, FL 33133-	Name of Employer Self Employed Occupation Investor	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 250.00		
D. Full Name, Mailing Address and Zip Code Al Wolf 2024 Yarmouth "B" Boca Raton, FL 33434-	Name of Employer A.S. Consulting Corp. Occupation CPA	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
E. Full Name, Mailing Address and Zip Code John Wolf 619 Pitcairn Place Pittsburgh, PA 15232-	Name of Employer Self Employed Occupation Businessman	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code John Wolf 2000 S. Ocean Blvd., Apt 202North Palm Beach, FL 33480-	Name of Employer Retired Occupation Retired	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		
G. Full Name, Mailing Address and Zip Code Leatrice Wolf 200 S. Oceaal Blvd., #202North Palm Beach, FL 33480-	Name of Employer Self Employed Occupation Lecturer	Date (month, day, year) 02/18/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 500.00		

SUBTOTAL of Receipts This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

2002011207

Attach schedule(s) for category of the Detailed Summary Page	PAGE 155 OF 157
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Linda Wolf 7085 Ayrshire Lane Boca Raton, FL 33496- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and Zip Code Steven Wolf 7085 Ayrshire Lane Boca Raton, FL 33496- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Real estate Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Aaron Wolfe 14872 Faversham Cir. Orlando, FL 32826 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Doran & Wolfe Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code Richard Wolfe 19902 NE 19th Court Miami, FL 33180- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Wayne Wolfson 472 Henkel Cir. Winter Park, FL 32789 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Regional Chiropractic Occupation Chiropractor Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Michael Woodrich 860 Waterman Rd. S Jacksonville, FL 32207- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Sanford Law Firm Occupation Attorney Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/25/2000 Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and Zip Code Scott Worley 171 El Puelbo Way Palm Beach, FL 33480-3215 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Developer Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/01/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,750.00

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SCHEDULE A

ITEMIZED RECEIPTS

20020112072	Not a separate schedule(s) of Form 278, category of the Detailed Summary Page	PAGE OF 156 157
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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Janice Yarborough 3531 NW 115 Terrace Fort Lauderdale, FL 33323-1345 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Finishmasters Occupation Sales Representative Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/13/2000 Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Leighton Yates 3218 S. Osceola Avenue Orlando, FL 32806 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Holland & Knight Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/15/2000 Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Evan Yegelow 2953 Mandarin Hollow Dr. Jacksonville, FL 32257- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Brown, Terrell, Hogan et.al. Occupation Attorney Aggregate Year-to-Date -> 500.00	Date (month, day, year) 02/08/2000 Florida 2000 Amount of Each Receipt this Period 500.00 MEMO
D. Full Name, Mailing Address and Zip Code John Young One SE Third Ave., 15th Floor Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Berkowitz, Dick, Pollack & Bran Occupation Accountant Aggregate Year-to-Date -> 250.00	Date (month, day, year) 02/28/2000 Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and Zip Code Robert Young 13910 Lakeshore Blvd., #130 Port Richey, FL 34667- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Stephen Zack 100 SE 2nd St., #2800 Miami, FL 33131- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/27/2000 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code David Zajac 17510 SE 55th St. Bellevue, WA 98006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date -> 250.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412673

 Form 2780 Schedule(s)
 and category of the
 Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Harriet Zimmerman 4 Via Las Incas Palm Beach, FL 33480- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/18/2000 Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Selig Zises 988 Fifth Ave. New York, NY 10021- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Associated Capital Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/22/2000 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Lois Zoller 3180 N. Lake Shore Drive Apt. 5-E Chicago, IL 60657- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer No Employer Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through Joint Action Committee For Political Affairs Highland Park, IL 60035 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Vivian Zumot-Dimond 7420 SW 49 Court Miami, FL 33143- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Homemaker Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/30/2000 Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

3,000.00

TOTAL This Period (last page this line number only)

699,125.90

SCHEDULE A

ITEMIZED RECEIPTS

20020712874	Indicate schedule(s) category of the Detailed Summary Page	PAGE 1 OF 11
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code American Federation of State, County & Municipal Employees - AFL-CIO 1625 L Street, NW Washington, DC 20036- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 03/27/2000	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and Zip Code ALPA-PAC Mr. Paul Hallisay 1625 Massachusetts Ave., NW Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 2,500.00
C. Full Name, Mailing Address and Zip Code American Assn of Nurse Anesthetists Ms. Wendy Parker 412 First St., SE, Suite 12 Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 02/01/2000	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code American Assn of Nurse Anesthetists Ms. Wendy Parker 412 First St., SE, Suite 12 Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code American Dental PAC Judy Sherman 1111 - 14th St., NW, Suite 1100 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/14/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code American Federation of Teachers Ms. Elizabeth M. Smith 555 New Jersey Ave., NW Washington, DC 20001- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 5,000.00
G. Full Name, Mailing Address and Zip Code American Hotel & Motel Association Mr. John P. Connors 1201 New York Ave., NW #600 Washington, DC 20005-3931 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	16,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

20020112075

 This is schedule (S)
 of 2002 category of the
 Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code American Hotel & Motel Association Mr. John P. Connors 1201 New York Ave., NW #600 Washington, DC 20005-3931 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 2,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code American Pharmaceutical Association Ms. Susan C. Winckler 2215 Constitution Ave., NW Washington, DC 20037-2985 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Director, Policy & Legislation Aggregate Year-to-Date ->	Date (month, day, year) 01/25/2000 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and Zip Code Bank of America Ms. Alex Sink 50 North Laura Street Jacksonville, FL 32202-3638 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and Zip Code Boilermakers Blacksmiths LEAP Mr. Ande M. Abbott 2722 Merrilee Dr., #360 Fairfax, VA 22031- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 2,000.00	Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and Zip Code Bricklayers and Allied Craftworkers PAC Mr. John Flynn 815 Fifteenth Street, N.W. Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Brotherhood of Locomotive Engineers Mr. Leroy D. Jones 1370 Ontario Street Cleveland, OH 44113-1702 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/22/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Buchanan Ingersoll, PC 1 Oxford Center, 20th Floor 301 Grant Street Library, PA 15129-1410 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 500.00	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412070	<input type="checkbox"/> Schedule (s) <input type="checkbox"/> Category of the Detailed Summary Page	PAGE 3 OF 11
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Build Political Action Committee National Assn. of Home Builders 1201 Fifteenth St., NW Washington, DC 20005-2800 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/06/2000 2,500.00	Amount of Each Receipt this Period 2,500.00
B. Full Name, Mailing Address and Zip Code Burson-Marsteller PAC 1801 K Stret, NW, Suite 901L Washington, DC 20006- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/22/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code CWA-COPE PCC Mr. Morton Bahr 501 - 3rd St., NW Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/16/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and Zip Code Citizens for Tony Hall Hon. Tony Hall P.O. Box E, Mid City Station Dayton, OH 45402- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/07/2000 500.00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Committee on Letter Carriers Political E Nat. Assn. of Letter Carriers, AFL-CIO Mr. Chris Norman Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/06/2000 3,000.00	Amount of Each Receipt this Period 3,000.00
F. Full Name, Mailing Address and Zip Code Committee on Letter Carriers Political E Nat. Assn. of Letter Carriers, AFL-CIO Mr. Chris Norman Washington, DC 20001- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 3,000.00	Amount of Each Receipt this Period 3,000.00
G. Full Name, Mailing Address and Zip Code Crowley Maritime Federal PAC Mr. Mike Roberts 1300 Pennsylvania Ave., NW, Ste. 870 Washington, DC 20004- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

16,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code DASH PAC 424 C Street NE Washington, DC 20002- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 3,000.00	Amount of Each Receipt this Period 3,000.00
B. Full Name, Mailing Address and Zip Code Dade County Fire Fighters Mr. Dominick F. Barbera 8000 NE 21 Street, Suite 222 Miami, FL 33122-1605 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 2,500.00	Amount of Each Receipt this Period 2,500.00
C. Full Name, Mailing Address and Zip Code Drive Political Fund 25 Louisiana Ave., NW Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/27/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and Zip Code Drive Political Fund 25 Louisiana Ave., NW Washington, DC 20001- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/27/2000 10,000.00	Amount of Each Receipt this Period 5,000.00
E. Full Name, Mailing Address and Zip Code Drs Good Government Fund Mr. & Mrs. Mark Newman 1101 30th St., NW, #500 Washington, DC 20007- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/28/2000 2,000.00	Amount of Each Receipt this Period 2,000.00
F. Full Name, Mailing Address and Zip Code El Pac Mr. Steven Alexander 5800 NW 77th Court Miami, FL 33166- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code National Committee For Effective Congress 122 C. Street, NW, Suite 650 Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Research Aggregate Year-to-Date ->	Date (month, day, year) 01/12/2000 5,000.00	Amount of Each Receipt this Period 5,000.00 IN-KIND

SUBTOTAL of Receipts This Page (optional)

23,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112070

 If this is a separate schedule (s)
 for a particular category of the
 detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Friends of Bob Graham Hon. Bob Graham P.O. Box 13472 Tallahassee, FL 32317-3472 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code General Electric Company Mr. Peter D. Prowitt 1299 Pennsylvania Ave., NW, 1100 West Washington, DC 20004-2407 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Handgun Control, Inc Voter Education Fund 1225 Eye St., NW, Suite 1100 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 5,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and Zip Code Harris FEPA Federal Political Action Committee Melbourne, FL 32919- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 500.00	Date (month, day, year) 03/10/2000	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and Zip Code Holland & Knight Mr. Steve Powell 2100 Pennsylvania Ave., NW, Suite 400 Washington, DC 20037- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,500.00	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 1,500.00
F. Full Name, Mailing Address and Zip Code Holland & Knight Mr. Steve Powell 2100 Pennsylvania Ave., NW, Suite 400 Washington, DC 20037- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code I.B.E.W.-C.O.P.E. Mr. Jim Weldon 1125 - 15th Street, N.W. Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112079

 Attach date schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code I.B.E.W.-C.O.P.E. Mr. Jim Weldon 1125 - 15th Street, N.W. Washington, DC 20005-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/08/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Independent Insurance Agents of America, Inc. PAC Mr. Paul Equall Washington, DC 20003-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 02/11/2000	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code Independent Insurance Agents of America, Inc. PAC Mr. Paul Equall Washington, DC 20003-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/23/2000	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code International Longshoremen's Assn. Committee of Political Education Mr. Robert E. Gleason New York, NY 10004-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code International Assn. of Fire Fighters Mr. Alfred K. Whitehead 1750 New York Ave., NW Washington, DC 20006-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/20/2000	Amount of Each Receipt this Period 2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code International Organization of Masters, Mates & Pilots PAC, AFL-CIO Mr. Timothy A. Brown, President Linthicum Heights, MD 21090-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code Johnston Senate Committee Sen. J. Bennett Johnston 8550 United Plaza Blvd., Suite 1001 Baton Rouge, LA 70809-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)

15,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112000

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

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code KidsPac, Inc. Mr. Bill Harris 80 Trowbridge St. Cambridge, MA 02138-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Laborers' Political League 905-16th Street, N.W. Washington, DC 20006-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code Laborers' Political League 905-16th Street, N.W. Washington, DC 20006-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 01/25/2000	Amount of Each Receipt this Period 5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code MEBA PAF Ms. Malissa Zimmerman 444 North Capitol Street, NW Washington, DC 20001-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code Mainstream America PAC 301 Main Street, Suite 1400 Baton Rouge, LA 70825-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/26/2000	Amount of Each Receipt this Period 3,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code Maintenance of Way Political League Mr. James Knight 26555 Evergreen Rd., Ste. 200 Southfield, MI 48076-4225	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code MoveOn, Org P.O. Box 9063 Berkeley, CA 94709-0063	Name of Employer Occupation Expenses Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 527.81
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND		

SUBTOTAL of Receipts This Page (optional)

21,027.81

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

2002011200

 Attach schedule(s)
for category of the
Detailed Summary Page

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FOR LINE NUMBER
11(c)

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code NAPUS PAC for Postmasters Mr. Robert M. Levi 8 Herbert St. Alexandria, VA 22305-2600 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 01/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code NMU P.L.O.W. Mr. Talmage E. Simpkins 1150 - 17th St., NW, Suite 700 Washington, DC 20036-4603 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code National Tank Truck Carriers PAC Mr. John Conley 2200 Mill Rd. Alexandria, VA 22314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and Zip Code PAC For A Change Barbara Boxer, Chair 601 S. Figueroa St., 23rd Floor Los Angeles, CA 90017-5704 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 2,000.00	Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and Zip Code Powers Pyles Sutter & Verville P.C. Mr. Peter W. Thomas 1875 Eye St., NW 12th Floor Washington, DC 20006-5409 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/03/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code REITPAC Real Estate Investment Trusts Mr. Martin L. DePoy Washington, DC 20006-5413 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and Zip Code Responsible Citizens Political League Mr. Tony Padilla 3 Research Place Rockville, MD 20850- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/22/2000 1,000.00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

8,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020412582

Use separate schedule(s) for each category of the following summary Page

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code SSL Political Action Committee Mr. Scott Baena 180 Maiden Lane, 34th Floor New York, NY 10038- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/20/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Seafarers Political Activity Terry Turner 5201 Auth Way Camp Springs, MD 20746- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/31/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
C. Full Name, Mailing Address and Zip Code Tenet Healthcare Corporation PAC Ms. Lynn Hart 3820 State Street Santa Barbara, CA 93105- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/30/2000 3,000.00	Amount of Each Receipt this Period 3,000.00
D. Full Name, Mailing Address and Zip Code The 20th District Florida Federal PAC Mr. Peter Deutsch P.O. Box 816621 Hollywood, FL 33081- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 01/25/2000 1,000.00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code The 20th District Florida Federal PAC Mr. Peter Deutsch P.O. Box 816621 Hollywood, FL 33081- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/13/2000 3,000.00	Amount of Each Receipt this Period 3,000.00
F. Full Name, Mailing Address and Zip Code The 20th District Florida Federal PAC Mr. Peter Deutsch P.O. Box 816621 Hollywood, FL 33081- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/13/2000 5,000.00	Amount of Each Receipt this Period 5,000.00
G. Full Name, Mailing Address and Zip Code The NEA Fund for Children & Public Educa Ms. Mary Elizabeth Teasley 1201 16th St., NW, Suite 421 Washington, DC 20036- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 03/13/2000 5,000.00	Amount of Each Receipt this Period 5,000.00

SUBTOTAL of Receipts This Page (optional)

23,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112683

Use appropriate schedule(s)
for each category of the
Detailed Summary PagePAGE OF
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code The People's Will 607 14th St. N.W. Suite 800 Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code The Perrier Group of America Mr. Mark Evans 777 West Putnam Avenue Greenwich, CT 06836- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 750.00	Date (month, day, year) 03/15/2000	Amount of Each Receipt this Period 750.00
C. Full Name, Mailing Address and Zip Code U. A. Political Education Committee Mr. Martin Maddaloni 901 Massachusetts Ave., NW Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,500.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 2,500.00
D. Full Name, Mailing Address and Zip Code UPSPAC Mr. Steven R. Okun 316 Pennsylvania Ave., SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/29/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Unisys Corporation Employees PAC Mr. David Pingree & Mr. Guy Spearman 8008 Westpark Dr. Mc Lean, VA 22102- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/02/2000	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and Zip Code Washington Political Action Committee Mr. Morris J. Amitay 444 N. Capitol St., NW, Suite 712 Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 2,000.00	Date (month, day, year) 03/22/2000	Amount of Each Receipt this Period 2,000.00
G. Full Name, Mailing Address and Zip Code Winston & Strawn PAC Mr. Charles L. Kinney 1400 L. St., NW Washington, DC 20005- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

9,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

20020112000

 Date schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Transport Workers Union PAC Mr. Sonny Hall 80 West End Avenue New York, NY 10023-	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 01/18/2000	Amount of Each Receipt this Period 2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)

2,500.00

TOTAL This Period (last page this line number only)

157,277.81

SCHEDULE A

ITEMIZED RECEIPTS

20020112685	1st Schedule(s) Category of the Detailed Summary Page	PAGE 1 OF 1
		FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)
Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Florida 2000 430 S. Capital St., SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 8,000.00
	Occupation	03/31/2000 Florida 2000	
	Aggregate Year-to-Date -> 8,000.00		
B. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	8,000.00
TOTAL This Period (last page this line number only)	8,000.00

SCHEDULE A

ITEMIZED RECEIPTS

2002042880 Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
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NAME OF COMMITTEE (In Full)
 Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer TRAVEL Occupation Treasurer & Insurance Comm. Aggregate Year-to-Date -> 368.50	Date (month, day, year) 02/21/2000 Amount of Each Receipt this Period 368.50
B. Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer TRAVEL Occupation Treasurer & Insurance Comm. Aggregate Year-to-Date -> 453.00	Date (month, day, year) 02/21/2000 Amount of Each Receipt this Period 84.50
C. Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer TRAVEL Occupation Treasurer & Insurance Comm. Aggregate Year-to-Date -> 519.00	Date (month, day, year) 03/06/2000 Amount of Each Receipt this Period 66.00
D. Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer TRAVEL Occupation Treasurer & Insurance Comm. Aggregate Year-to-Date -> 675.50	Date (month, day, year) 03/14/2000 Amount of Each Receipt this Period 156.50
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	675.50
TOTAL This Period (last page this line number only)	675.50

SCHEDULE A

ITEMIZED RECEIPTS

2002 01/2003	Schedule(s) For category of the Detailed Summary Page	PAGE 1 OF 1
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

A. Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer INTEREST Occupation Aggregate Year-to-Date -> 5,384.15	Date (month, day, year) 01/31/2000 Amount of Each Receipt this Period 5,384.15
B. Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer INTEREST Occupation Aggregate Year-to-Date -> 11,054.28	Date (month, day, year) 02/29/2000 Amount of Each Receipt this Period 5,670.13
C. Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer BANK THINKS DEP ERR. WE DON'T Occupation Aggregate Year-to-Date -> 11,074.28	Date (month, day, year) 03/22/2000 Amount of Each Receipt this Period 20.00
D. Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer INTEREST Occupation Aggregate Year-to-Date -> 18,617.30	Date (month, day, year) 03/31/2000 Amount of Each Receipt this Period 7,543.02
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / / Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	18,617.30
TOTAL This Period (last page this line number only)	18,617.30

SCHEDULE B

ITEMIZED DISBURSEMENTS

2002 112688

Use separate schedule(s)
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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code AT&T Wireless Post Office Box 129 Newark, NJ 07101-0129	Purpose of Disbursement Cell Phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 313.09
Full Name, Mailing Address and Zip Code AT&T Wireless Post Office Box 129 Newark, NJ 07101-0129	Purpose of Disbursement Cell Phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 292.78
Full Name, Mailing Address and Zip Code AT&T Wireless Post Office Box 129 Newark, NJ 07101-0129	Purpose of Disbursement Cell Phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 291.14
Full Name, Mailing Address and Zip Code Artcraft Printers, Inc. 119 Century Park Dr. P.O. Box 897 Tallahassee, FL 32302-	Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/03/2000	Amount of Each Disbursement This Period 126.26
Full Name, Mailing Address and Zip Code Artcraft Printers, Inc. 119 Century Park Dr. P.O. Box 897 Tallahassee, FL 32302-	Purpose of Disbursement Envelopes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/05/2000	Amount of Each Disbursement This Period 53.50
Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/11/2000	Amount of Each Disbursement This Period 2,491.57
Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/07/2000	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional)

4,568.34

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

20020112689

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PAGE 2 OF 23
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/10/2000	Amount of Each Disbursement This Period 7,500.00
Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/2000	Amount of Each Disbursement This Period 6,500.00
Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 7,500.00
Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/18/2000	Amount of Each Disbursement This Period 829.70
Full Name, Mailing Address and Zip Code Assets Consulting 110 B. East Broad St. Falls Church, VA 22046-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 7,500.00
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/11/2000	Amount of Each Disbursement This Period 518.00
Full Name, Mailing Address and Zip Code Business Communications Inc. 831 N. Monroe St. Tallahassee, FL 32303-	Purpose of Disbursement Phone Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/05/2000	Amount of Each Disbursement This Period 418.19

SUBTOTAL of Disbursements This Page (optional)

30,765.89

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SCHEDULE B

ITEMIZED DISBURSEMENTS

20020112690

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Business Communications Inc. 831 N. Monroe St. Tallahassee, FL 32303-	Purpose of Disbursement Phone Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/03/2000	Amount of Each Disbursement This Period 418.19
Full Name, Mailing Address and Zip Code Business Communications Inc. 831 N. Monroe St. Tallahassee, FL 32303-	Purpose of Disbursement Relocate phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 34.24
Full Name, Mailing Address and Zip Code Business Communications Inc. 831 N. Monroe St. Tallahassee, FL 32303-	Purpose of Disbursement Phone Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 418.19
Full Name, Mailing Address and Zip Code Ronald Bergeron 19612 SW 69th Place Fort Lauderdale, FL 33332	Purpose of Disbursement Excess Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/13/2000	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address and Zip Code Berman Industries Mr. Steve Berman & Mr. Marty Berman Palisade Capital One Bridge Plaza Fort Lee, NJ 07024-	Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/21/2000	Amount of Each Disbursement This Period 793.00
Full Name, Mailing Address and Zip Code Bill's Catering 2167 South Bayshore Dr. Miami, FL 33133-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 2,860.00
Full Name, Mailing Address and Zip Code Shirley Brown 4734 Country Manor Dr. Sarasota, FL 34233-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 866.00 IN KIND

SUBTOTAL of Disbursements This Page (optional)

5,889.62

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code CHPA 1348 Timberlane Rd. Tallahassee, FL 32308-	Purpose of Disbursement Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/07/2000	Amount of Each Disbursement This Period 176.96
Full Name, Mailing Address and Zip Code CHPA 1348 Timberlane Rd. Tallahassee, FL 32308-	Purpose of Disbursement Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 176.96
Full Name, Mailing Address and Zip Code City of Tallahassee 300 South Adams St. Tallahassee, FL 32301- 170	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 442.89
Full Name, Mailing Address and Zip Code City of Tallahassee 300 South Adams St. Tallahassee, FL 32301- 170	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 277.34
Full Name, Mailing Address and Zip Code City of Tallahassee 300 South Adams St. Tallahassee, FL 32301- 170	Purpose of Disbursement Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 245.11
Full Name, Mailing Address and Zip Code William Dannahower 809 S. Indian River Dr. Fort Pierce, FL 34950-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/10/2000	Amount of Each Disbursement This Period 214.53 IN KIND
Full Name, Mailing Address and Zip Code Stephen Dresnick 6855 S. Red Road Suite 400 Coral Gables, FL 33143	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/10/2000	Amount of Each Disbursement This Period 216.88 IN KIND

SUBTOTAL of Disbursements This Page (optional)

1,750.67

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code ElectroNet Intermedia Consulting 3411 Capital Medical Boulevard Tallahassee, FL 32308-	Purpose of Disbursement Internet Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/11/2000	Amount of Each Disbursement This Period 155.00
Full Name, Mailing Address and Zip Code ElectroNet Intermedia Consulting 3411 Capital Medical Boulevard Tallahassee, FL 32308-	Purpose of Disbursement Internet Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/07/2000	Amount of Each Disbursement This Period 155.00
Full Name, Mailing Address and Zip Code FL Dept. of Revenue 5050 W. Tennessee St. Tallahassee, FL 32399-0135	Purpose of Disbursement State Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/13/2000	Amount of Each Disbursement This Period 357.00
Full Name, Mailing Address and Zip Code National Committee For Effective Congress 122 C. Street, NW, Suite 650 Washington, DC 20001-	Purpose of Disbursement Research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/12/2000	Amount of Each Disbursement This Period 5,000.00 IN KIND
Full Name, Mailing Address and Zip Code Friends of Barbara Boxer Ms. Gloria Littman P.O. Box 641751 Los Angeles, CA 90064-	Purpose of Disbursement Materials Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 350.00
Full Name, Mailing Address and Zip Code Lisa Fuller 233 Office Plaza Tallahassee, FL 32301-	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 1,712.00
Full Name, Mailing Address and Zip Code Lisa Fuller 233 Office Plaza Tallahassee, FL 32301-	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 1,712.00

SUBTOTAL of Disbursements This Page (optional)

9,441.00

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Lisa Fuller 233 Office Plaza Tallahassee, FL 32301-	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 1,712.00
Full Name, Mailing Address and Zip Code Margaret Gagnon 1647 Eagles Landing Blvd., Apt # 3 Tallahassee, FL 32308-	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 3,169.75
Full Name, Mailing Address and Zip Code Margaret Gagnon 1647 Eagles Landing Blvd., Apt # 3 Tallahassee, FL 32308-	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 3,169.75
Full Name, Mailing Address and Zip Code Margaret Gagnon 1647 Eagles Landing Blvd., Apt # 3 Tallahassee, FL 32308-	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 88.78
Full Name, Mailing Address and Zip Code Margaret Gagnon 1647 Eagles Landing Blvd., Apt # 3 Tallahassee, FL 32308-	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 155.15
Full Name, Mailing Address and Zip Code Richard Graves P.O. Box 277 Wabasso, FL 32970-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/10/2000	Amount of Each Disbursement This Period 214.53 IN KIND
Full Name, Mailing Address and Zip Code Hamilton Beattie & S 308 1/2 Center St., 2nd Floor Fernandina Beach, FL 32034-	Purpose of Disbursement Research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 27,811.26

SUBTOTAL of Disbursements This Page (optional)

36,321.22

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Hamilton Beattie & S 308 1/2 Center St., 2nd Floor Fernandina Beach, FL 32034-	Purpose of Disbursement Research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 18,500.00
Full Name, Mailing Address and Zip Code Hamilton Beattie & S 308 1/2 Center St., 2nd Floor Fernandina Beach, FL 32034-	Purpose of Disbursement Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 281.47
Full Name, Mailing Address and Zip Code Cameron Harris Box 220748 Charlotte, NC 28222-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 538.61
Full Name, Mailing Address and Zip Code Michael Henry 1601-40 Eagles Landing Blvd. Tallahassee, FL 32308-	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 236.47
Full Name, Mailing Address and Zip Code Michael Henry 1601-40 Eagles Landing Blvd. Tallahassee, FL 32308-	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 4,265.99
Full Name, Mailing Address and Zip Code Michael Henry 1601-40 Eagles Landing Blvd. Tallahassee, FL 32308-	Purpose of Disbursement Filing Cabinet Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 40.00
Full Name, Mailing Address and Zip Code Michael Henry 1601-40 Eagles Landing Blvd. Tallahassee, FL 32308-	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 5,552.99

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29,415.53

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Ann Kennedy 5108 Stonehurst Road Tampa, FL 33647-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/20/2000	Amount of Each Disbursement This Period 399.97 IN KIND
Full Name, Mailing Address and Zip Code Kimball Stroud 227 Massachusetts Ave., NE Suite 302 Washington, DC 20002-	Purpose of Disbursement Fee Bal. & Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/20/2000	Amount of Each Disbursement This Period 8,421.80
Full Name, Mailing Address and Zip Code Loews Miami Beach Hotel 1601 Collins Ave. Miami Beach, FL 33139-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/03/2000	Amount of Each Disbursement This Period 1,618.50
Full Name, Mailing Address and Zip Code Mac Mascioli 1209 Delaware Ave. Fort Pierce, FL 34950-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/10/2000	Amount of Each Disbursement This Period 604.53 IN KIND
Full Name, Mailing Address and Zip Code Cappy McGarr 2911 Turtle Creek Blvd. #907 Dallas, TX 75219-	Purpose of Disbursement Excess Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/22/2000	Amount of Each Disbursement This Period 559.28
Full Name, Mailing Address and Zip Code Michael Minton 2513 South indian River Drive Fort Pierce, FL 34950-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/10/2000	Amount of Each Disbursement This Period 214.53 IN KIND
Full Name, Mailing Address and Zip Code MoveOn,Org P.O. Box 9063 Berkeley, CA 94709-0063	Purpose of Disbursement Credit Card Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/23/2000	Amount of Each Disbursement This Period 25.89

SUBTOTAL of Disbursements This Page (optional)

11,844.50

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SCHEDULE B

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code MoveOn,Org P.O. Box 9063 Berkeley, CA 94709-0063	Purpose of Disbursement Credit Card Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 208.37
Full Name, Mailing Address and Zip Code MoveOn,Org P.O. Box 9063 Berkeley, CA 94709-0063	Purpose of Disbursement Credit Card Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/16/2000	Amount of Each Disbursement This Period 20.72
Full Name, Mailing Address and Zip Code MoveOn,Org P.O. Box 9063 Berkeley, CA 94709-0063	Purpose of Disbursement Credit Card Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 315.89
Full Name, Mailing Address and Zip Code MoveOn,Org P.O. Box 9063 Berkeley, CA 94709-0063	Purpose of Disbursement Credit Card Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 116.75
Full Name, Mailing Address and Zip Code MoveOn,Org P.O. Box 9063 Berkeley, CA 94709-0063	Purpose of Disbursement Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/31/2000	Amount of Each Disbursement This Period 527.81 IN KIND
Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 3,230.42
Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/11/2000	Amount of Each Disbursement This Period 452.47

SUBTOTAL of Disbursements This Page (optional)

4,872.43

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Mr. Bill Nelson 930 Live Oak Plantation Road Tallahassee, FL 32312-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 34.50
Full Name, Mailing Address and Zip Code Mr. Steven R. Pederson 2301 Collins Ave., #1020 Miami Beach, FL 33139-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 2,225.80
Full Name, Mailing Address and Zip Code Beata Pilecki 2793 SW 3rd Place Wakulla Springs, FL 32305-	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 1,407.73
Full Name, Mailing Address and Zip Code Beata Pilecki 2793 SW 3rd Place Wakulla Springs, FL 32305-	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 1,407.73
Full Name, Mailing Address and Zip Code Postmaster 2355 Centerville Road Tallahassee, FL 32308-	Purpose of Disbursement Stamps Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/23/2000	Amount of Each Disbursement This Period 600.00
Full Name, Mailing Address and Zip Code Postmaster 2355 Centerville Road Tallahassee, FL 32308-	Purpose of Disbursement Bulk Rate Deposit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 100.00
Full Name, Mailing Address and Zip Code Postmaster 2355 Centerville Road Tallahassee, FL 32308-	Purpose of Disbursement Meter Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/24/2000	Amount of Each Disbursement This Period 675.94

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6,451.70

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Richard Reeves 966 Richardson Road Tallahassee, FL 32301-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 3,000.00
Full Name, Mailing Address and Zip Code Richard Reeves 966 Richardson Road Tallahassee, FL 32301-	Purpose of Disbursement Fee & Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 3,658.12
Full Name, Mailing Address and Zip Code Richard Reeves 966 Richardson Road Tallahassee, FL 32301-	Purpose of Disbursement Bonus/Fee Bal/Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/18/2000	Amount of Each Disbursement This Period 3,129.55
Full Name, Mailing Address and Zip Code Richard Reeves 966 Richardson Road Tallahassee, FL 32301-	Purpose of Disbursement Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 3,500.00
Full Name, Mailing Address and Zip Code Richard Reeves 966 Richardson Road Tallahassee, FL 32301-	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 948.51
Full Name, Mailing Address and Zip Code Ridgewell's Inc. 5525 Dorsey Lane Bethesda, MD 20816-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 3,280.96
Full Name, Mailing Address and Zip Code Lori Samuels 5212 S.W. 115 Terrace Cooper City, FL 33330-	Purpose of Disbursement Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 7,000.00

SUBTOTAL of Disbursements This Page (optional)

24,517.14

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SCHEDULE B
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2002 112699

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Lori Samuels 5212 S.W. 115 Terrace Cooper City, FL 33330-	Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/07/2000	Amount of Each Disbursement This Period 807.39
Full Name, Mailing Address and Zip Code Shrum, Devine & Donilon, Inc. 2141 Wisconsin Ave., Suite H. Washington, DC 20007-	Purpose of Disbursement Fall Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 3,101.51
Full Name, Mailing Address and Zip Code Mr. David Simpson 8325 Caplock Rd. Tallahassee, FL 32311-	Purpose of Disbursement Data Entry Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 360.00
Full Name, Mailing Address and Zip Code Alicia Smith 1401 K. Street NW, Suite 1200 Washington, DC 20005-	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/30/2000	Amount of Each Disbursement This Period 486.60 IN KIND
Full Name, Mailing Address and Zip Code Sonitrol 1136 Thomasville Rd. Tallahassee, FL 32312-	Purpose of Disbursement February Monitoring Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 58.85
Full Name, Mailing Address and Zip Code Sonitrol 1136 Thomasville Rd. Tallahassee, FL 32312-	Purpose of Disbursement January Monitoring Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 58.85
Full Name, Mailing Address and Zip Code Sonitrol 1136 Thomasville Rd. Tallahassee, FL 32312-	Purpose of Disbursement March Monitoring Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 58.85

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4,932.05

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Sprint Post Office Box 30784 Tampa, FL 33630-3784	Purpose of Disbursement 850-222-8777 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 276.63
Full Name, Mailing Address and Zip Code Sprint Post Office Box 30784 Tampa, FL 33630-3784	Purpose of Disbursement 850-222-8777 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 477.92
Full Name, Mailing Address and Zip Code Sprint Post Office Box 30784 Tampa, FL 33630-3784	Purpose of Disbursement 850-222-8777 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 684.77
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/12/2000	Amount of Each Disbursement This Period 5.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/10/2000	Amount of Each Disbursement This Period 5.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/13/2000	Amount of Each Disbursement This Period 1,725.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/24/2000	Amount of Each Disbursement This Period 6.00

SUBTOTAL of Disbursements This Page (optional)

3,180.32

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/14/2000	Amount of Each Disbursement This Period 6.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 5,043.37
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bankcard Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/13/2000	Amount of Each Disbursement This Period 480.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/08/2000	Amount of Each Disbursement This Period 6.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Bank Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/27/2000	Amount of Each Disbursement This Period 6.00
Full Name, Mailing Address and Zip Code SunTrust P.O. Box 3926 Tallahassee, FL 32315-3926	Purpose of Disbursement Payroll taxes- Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 5,909.37
Full Name, Mailing Address and Zip Code SunTrust BankCard, N.A. P.O. Box 4911 Orlando, FL 32898-4911	Purpose of Disbursement See Below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 2,173.38

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13,624.12

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SCHEDULE B

ITEMIZED DISBURSEMENTS

20010112702

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code SunTrust BankCard , N.A. P.O. Box 4911 Orlando, FL 32898-4911	Purpose of Disbursement See Below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/03/2000	Amount of Each Disbursement This Period 4,911.42
Full Name, Mailing Address and Zip Code SunTrust BankCard , N.A. P.O. Box 4911 Orlando, FL 32898-4911	Purpose of Disbursement See Below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 4,259.55
Full Name, Mailing Address and Zip Code A Ticket To Ride 4400 Bayou Blvd. Pensacola, FL 32503-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/22/1999	Amount of Each Disbursement This Period 13.00 MEMO
Full Name, Mailing Address and Zip Code American Air 619612 Dallas, TX 75261-9612	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 167.50 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Credit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period -12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Credit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period -12.00 MEMO

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9,170.97

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ITEMIZED DISBURSEMENTS

20020112703

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/03/1999	Amount of Each Disbursement This Period 20.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/10/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/08/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Credit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period -12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/10/1999	Amount of Each Disbursement This Period 12.00 MEMO

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ITEMIZED DISBURSEMENTS

20020112704

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Astro Travel & Tours 926 N. Monroe Street Tallahassee, FL 32303-	Purpose of Disbursement Ticket Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 12.00 MEMO
Full Name, Mailing Address and Zip Code Avis Rent A Car 3300 SW Capital Circle Tallahassee, FL 32301-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/13/1999	Amount of Each Disbursement This Period 52.72 MEMO
Full Name, Mailing Address and Zip Code Avis Rent A Car 3300 SW Capital Circle Tallahassee, FL 32301-	Purpose of Disbursement Credit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/20/1999	Amount of Each Disbursement This Period -53.86 MEMO
Full Name, Mailing Address and Zip Code Avis Rent A Car 3300 SW Capital Circle Tallahassee, FL 32301-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 144.90 MEMO
Full Name, Mailing Address and Zip Code Avis Rent A Car 3300 SW Capital Circle Tallahassee, FL 32301-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/17/1999	Amount of Each Disbursement This Period 151.23 MEMO
Full Name, Mailing Address and Zip Code Avis Rent A Car 3300 SW Capital Circle Tallahassee, FL 32301-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/10/1999	Amount of Each Disbursement This Period 33.28 MEMO

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Biltmore Hotel 1200 Anastasia Ave. Coral Gables, FL 33134-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/12/1999	Amount of Each Disbursement This Period 30.63 MEMO
Full Name, Mailing Address and Zip Code Biltmore Hotel 1200 Anastasia Ave. Coral Gables, FL 33134-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/12/1999	Amount of Each Disbursement This Period 6.28 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/03/1999	Amount of Each Disbursement This Period 203.00 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Credit Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period -179.25 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 179.25 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Credit Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period -368.50 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/10/1999	Amount of Each Disbursement This Period 179.25 MEMO

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/03/1999	Amount of Each Disbursement This Period 203.00 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 368.50 MEMO
Full Name, Mailing Address and Zip Code Delta Airlines Hartfield International Airport Atlanta, GA 30320-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 212.25 MEMO
Full Name, Mailing Address and Zip Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Communications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 13.00 MEMO
Full Name, Mailing Address and Zip Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Communications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/28/1999	Amount of Each Disbursement This Period 11.75 MEMO
Full Name, Mailing Address and Zip Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Communications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 17.50 MEMO
Full Name, Mailing Address and Zip Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Communications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/13/1999	Amount of Each Disbursement This Period 21.00 MEMO

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Communications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/28/1999	Amount of Each Disbursement This Period 17.75 MEMO
Full Name, Mailing Address and Zip Code FedEx P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Communications Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/06/1999	Amount of Each Disbursement This Period 17.50 MEMO
Full Name, Mailing Address and Zip Code Hampton Inns 3210 N. Monroe St. Tallahassee, FL 32303-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/13/1999	Amount of Each Disbursement This Period 87.69 MEMO
Full Name, Mailing Address and Zip Code Ikon Office Solutions Florida District P.O. Box 905923 Charlotte, NC 28290-5923	Purpose of Disbursement Credit for double billing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period -401.00 MEMO
Full Name, Mailing Address and Zip Code Marriott Hotels 3151 River Rd. Chicago, IL 60624-	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/1999	Amount of Each Disbursement This Period 107.80 MEMO
Full Name, Mailing Address and Zip Code Office Depot 1416 Apalachee Pkwy Tallahassee, FL 32301-	Purpose of Disbursement Fax Modem Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/16/1999	Amount of Each Disbursement This Period 173.29 MEMO
Full Name, Mailing Address and Zip Code Office Depot 1416 Apalachee Pkwy Tallahassee, FL 32301-	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/01/1999	Amount of Each Disbursement This Period 97.25 MEMO

SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

20020112708

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code Postmaster 2355 Centerville Road Tallahassee, FL 32308-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/1999	Amount of Each Disbursement This Period 330.00 MEMO
Full Name, Mailing Address and Zip Code Postmaster 2355 Centerville Road Tallahassee, FL 32308-	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/20/1999	Amount of Each Disbursement This Period 66.00 MEMO
Full Name, Mailing Address and Zip Code Publix 3483 Thomasville Rd. Tallahassee, FL 32308-	Purpose of Disbursement Staff Retreat Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/18/1999	Amount of Each Disbursement This Period 91.60 MEMO
Full Name, Mailing Address and Zip Code Publix 3483 Thomasville Rd. Tallahassee, FL 32308-	Purpose of Disbursement Staff Retreat Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/16/1999	Amount of Each Disbursement This Period 226.81 MEMO
Full Name, Mailing Address and Zip Code USAir P.O. Box 66100 Winston Salem, NC 27102-1501	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/1999	Amount of Each Disbursement This Period 204.25 MEMO
Full Name, Mailing Address and Zip Code USAir P.O. Box 66100 Winston Salem, NC 27102-1501	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/08/1999	Amount of Each Disbursement This Period 204.25 MEMO
Full Name, Mailing Address and Zip Code USAir P.O. Box 66100 Winston Salem, NC 27102-1501	Purpose of Disbursement Credit Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period -144.25 MEMO

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

20020112709

Use appropriate schedule(s)
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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code USAir P.O. Box 66100 Winston Salem, NC 27102-1501	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/10/1999	Amount of Each Disbursement This Period 204.25 MEMO
Full Name, Mailing Address and Zip Code USAir P.O. Box 66100 Winston Salem, NC 27102-1501	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 144.25 MEMO
Full Name, Mailing Address and Zip Code USAir P.O. Box 66100 Winston Salem, NC 27102-1501	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/02/1999	Amount of Each Disbursement This Period 144.25 MEMO
Full Name, Mailing Address and Zip Code Wyndham Hotel Lake Buena Vista Orlando, Florida ,	Purpose of Disbursement Event Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/1999	Amount of Each Disbursement This Period 999.66 MEMO
Full Name, Mailing Address and Zip Code Wyndham Hotel Lake Buena Vista Orlando, Florida ,	Purpose of Disbursement Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/13/1999	Amount of Each Disbursement This Period 43.18 MEMO
Full Name, Mailing Address and Zip Code TELCO Communications Group Post Office Box 105258 Atlanta, GA 30348-5258	Purpose of Disbursement November Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/18/2000	Amount of Each Disbursement This Period 498.25
Full Name, Mailing Address and Zip Code TELCO Communications Group Post Office Box 105258 Atlanta, GA 30348-5258	Purpose of Disbursement December Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/09/2000	Amount of Each Disbursement This Period 281.17

SUBTOTAL of Disbursements This Page (optional)

779.42

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

20020112710

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code TELCO Communications Group Post Office Box 105258 Atlanta, GA 30348-5258	Purpose of Disbursement October Bill Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 431.24
Full Name, Mailing Address and Zip Code Tallahassee Copy 1001 N. Monroe St. Tallahassee, FL 32303-	Purpose of Disbursement Monarch Stationary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/14/2000	Amount of Each Disbursement This Period 519.47
Full Name, Mailing Address and Zip Code Tiani's Cleaning 3659 Matt Wing Tallahassee, FL 32311-	Purpose of Disbursement February Cleaning Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/25/2000	Amount of Each Disbursement This Period 151.15
Full Name, Mailing Address and Zip Code Tiani's Cleaning 3659 Matt Wing Tallahassee, FL 32311-	Purpose of Disbursement December Cleaning Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/04/2000	Amount of Each Disbursement This Period 150.00
Full Name, Mailing Address and Zip Code Tiani's Cleaning 3659 Matt Wing Tallahassee, FL 32311-	Purpose of Disbursement January Cleaning Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/31/2000	Amount of Each Disbursement This Period 225.00
Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,476.86

TOTAL This Period (last page this line number only)

199,001.78

SCHEDULE B

ITEMIZED DISBURSEMENTS

20020112711

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NAME OF COMMITTEE (In Full)

Bill Nelson for U.S. Senate Campaign Committee

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lane Genet 9400 S. Dadeland Blvd. Miami, FL 33156-	Check was a P.A. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/04/2000	100.00
Karen Taplin 2535 Embassy Drive West Palm Beach, FL 33401	Refund of 12/31/99 Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/14/2000	500.00
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	
		/ /	

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

600.00

GARY SISCO
SECRETARY

20020112712

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: 202-224-0322

United States Senate

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