

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
TREASURE COAST JOBS COALITION

ADDRESS (number and street) 601 PENNSYLVANIA AVENUE NW NORTH BUILDING SUITE 1000 WASHINGTON DC 20004
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00524793
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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

5. Covering Period 07 01 2012 through 09 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James Tyrrell III

Signature of Treasurer James Tyrrell III [Electronically Filed] Date 10 15 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TREASURE COAST JOBS COALITION

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1081000.00"/>	<input type="text" value="1081000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1081000.00"/>	<input type="text" value="1081000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="955355.95"/>	<input type="text" value="955355.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="125644.05"/>	<input type="text" value="125644.05"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TREASURE COAST JOBS COALITION

Report Covering the Period: From: 07 / 01 / 2012 To: 09 / 30 / 2012

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).....	1081000.00	1081000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1081000.00	1081000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1081000.00	1081000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1081000.00	1081000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1081000.00	1081000.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	16660.15	16660.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16660.15	16660.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	938695.80	938695.80
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	955355.95	955355.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	955355.95	955355.95

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1081000.00	1081000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1081000.00	1081000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16660.15	16660.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16660.15	16660.15

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

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

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
TREASURE COAST JOBS COALITION

A. John K Castle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1095 N. Ocean Blvd.
 City State Zip Code
 Palm Beach FL 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Castle Harlan, Inc. Chairman
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2012
Transaction ID : SA11AI.4113
 Amount of Each Receipt this Period
 1000.00

B. Dr. Richard Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 Arbutus Drive
 City State Zip Code
 Lakewood NJ 08701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mutual Pharmacy Co. Senior Advisor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2012
Transaction ID : SA11AI.4101
 Amount of Each Receipt this Period
 1000000.00

C. Robert Shillman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 676267
 City State Zip Code
 Rancho Santa Fe CA 92067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cognex Corp. Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : SA11AI.4111
 Amount of Each Receipt this Period
 25000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1026000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TREASURE COAST JOBS COALITION

Full Name (Last, First, Middle Initial)
A. Herbert Siegel

Mailing Address 55 East 59th Street
Suite 22B

City New York State NY Zip Code 10022

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2012
Transaction ID : SA11AI.4103

Amount of Each Receipt this Period
12500.00

Full Name (Last, First, Middle Initial)
B. Jeanne Siegel

Mailing Address 55 East 59th Street
Suite 22B

City New York State NY Zip Code 10022

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2012
Transaction ID : SA11AI.4105

Amount of Each Receipt this Period
12500.00

Full Name (Last, First, Middle Initial)
C. Cathy Spano

Mailing Address 711 Seagate Drive

City Delray Beach State FL Zip Code 33483

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

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40000.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
TREASURE COAST JOBS COALITION

A. Peter Spano
Full Name (Last, First, Middle Initial)
Mailing Address 711 Seagate Drive
City Delray Beach State FL Zip Code 33483
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2012
Transaction ID : SA11AI.4107
Amount of Each Receipt this Period
15000.00

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

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

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	1081000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TREASURE COAST JOBS COALITION

Full Name (Last, First, Middle Initial)

A. Berkowitz Public Affairs

Mailing Address 1329 K St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Research Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2012

Transaction ID : SB21B.4115

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

B. Chainbridge Bank

Mailing Address 1445-A Laughlin Avenue

City McLean State VA Zip Code 22101

Purpose of Disbursement
Business Checks

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2012

Transaction ID : SB21B.4140

Amount of Each Disbursement this Period

230.15

Full Name (Last, First, Middle Initial)

C. Chainbridge Bank

Mailing Address 1445-A Laughlin Avenue

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.4142

Amount of Each Disbursement this Period

180.00

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

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

2160.15

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

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

FOR LINE NUMBER:
(check only one)

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

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)
TREASURE COAST JOBS COALITION

Full Name (Last, First, Middle Initial)

A. Clark Hill PLC

Mailing Address 601 Pennsylvania Avenue NW
Suite 1000N

City Washington State DC Zip Code 20004

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2012

Transaction ID : SB21B.4117

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mercury Public Affairs LLC

Mailing Address 137 Fifth Avenue
3rd Floor

City New York State NY Zip Code 10010

Purpose of Disbursement
Website Development Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2012

Transaction ID : SB21B.4139

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. Mercury Public Affairs LLC

Mailing Address 137 Fifth Avenue
3rd Floor

City New York State NY Zip Code 10010

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : SB21B.4137

Amount of Each Disbursement this Period

1500.00

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
TREASURE COAST JOBS COALITION

Full Name (Last, First, Middle Initial)

A. Mercury Public Affairs LLC

Mailing Address 137 Fifth Avenue
3rd Floor

City New York State NY Zip Code 10010

Purpose of Disbursement
List Purchase

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 20 / 2012

Transaction ID : SB21B.4150

Amount of Each Disbursement this Period

4500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

4500.00

16660.15

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION		FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee CampaignGrid LLC		Date M M / D D / Y Y Y Y Y Y 09 / 14 / 2012
Mailing Address 414 Commerce Drive		Amount 25000.00
City Fort Washington	State Zip Code PA 19034	
Purpose of Expenditure Internet Advertising	Category/Type 	Transaction ID : SE.4119 Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought 506590.00		

Full Name (Last, First, Middle Initial) of Payee Mercury Public Affairs LLC		Date M M / D D / Y Y Y Y Y Y 09 / 20 / 2012
Mailing Address 137 Fifth Avenue 3rd Floor		Amount 10078.44
City New York	State Zip Code NY 10010	
Purpose of Expenditure Direct Mail Production	Category/Type 	Transaction ID : SE.4126 Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought 516668.44		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	35078.44
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

James Tyrrell III
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TREASURE COAST JOBS COALITION
FEC IDENTIFICATION NUMBER
C C00524793
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name (Last, First, Middle Initial) of Payee
Mercury Public Affairs LLC
Mailing Address 137 Fifth Avenue
3rd Floor
City New York State NY Zip Code 10010
Date 09 / 27 / 2012
Amount 8831.22
Transaction ID : SE.4132
Purpose of Expenditure Direct Mail Production
Category/Type
Office Sought: [X] House State: FL
Senate District: 18
President
Check One: [] Support [X] Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK MURPHY
Calendar Year-To-Date Per Election for Office Sought 924347.54
Disbursement For: [] Primary [X] General
2012 [] Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Smart Media Group LLC
Mailing Address 814 King Street
Suite 400
City Alexandria State VA Zip Code 22314
Date 09 / 12 / 2012
Amount 459550.00
Transaction ID : SE.4122
Purpose of Expenditure Media Buy
Category/Type
Office Sought: [X] House State: FL
Senate District: 18
President
Check One: [] Support [X] Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:
PATRICK MURPHY
Calendar Year-To-Date Per Election for Office Sought 459550.00
Disbursement For: [] Primary [X] General
2012 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 468381.22
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
James Tyrrell III [Electronically Filed] Date 10 / 15 / 2012
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Smart Media Group LLC			Date M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2012		
Mailing Address 814 King Street Suite 400			Amount 365775.00		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4130		
Purpose of Expenditure Media Buy	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: FL District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 899316.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name (Last, First, Middle Initial) of Payee Something Else Strategies, LLC			Date M M M / D D D / Y Y Y Y Y Y 09 / 12 / 2012		
Mailing Address 112 Lantern Ridge Drive			Amount 22040.00		
City Easley	State SC	Zip Code 29642	Transaction ID : SE.4124		
Purpose of Expenditure Media Production	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: FL District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 481590.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	387815.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

James Tyrrell III
 Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Something Else Strategies, LLC		Date M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2012
Mailing Address 112 Lantern Ridge Drive		Amount 16200.00
City Easley	State SC	Zip Code 29642
Purpose of Expenditure Media Production	Category/ Type	Transaction ID : SE.4131
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 915516.32		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee USPS		Date M M M / D D D / Y Y Y Y Y Y 09 / 20 / 2012
Mailing Address 3200 Summit Blvd.		Amount 16872.88
City West Palm Beach	State FL	Zip Code 33416
Purpose of Expenditure Direct Mail Postage	Category/ Type	Transaction ID : SE.4128
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 533541.32		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	33072.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

James Tyrrell III

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TREASURE COAST JOBS COALITION	FEC IDENTIFICATION NUMBER ▼ C C00524793
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee USPS		Date MM / DD / YYYY 09 / 27 / 2012
Mailing Address 3200 Summit Blvd.		Amount 14348.26
City West Palm Beach	State Zip Code FL 33416	
Purpose of Expenditure Direct Mail Postage	Category/Type	Transaction ID : SE.4133
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 938695.80		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14348.26
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	938695.80

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

James Tyrrell III

Signature _____ [Electronically Filed] Date **10 / 15 / 2012**