FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

Frederica S Wilson for Congress

ADDRESS (number and street) ▼ 413 New Jersey Avenue

☐ Check if different than previously reported. (ACC)

Washington | DC | 20003 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00460055

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ DISTRICT: FL 24

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

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

- ☐ Primary (12P)
- ☒ General (12G)
- ☐ Runoff (12R)
- ☐ Convention (12C)
- ☐ Special (12S)

Election on M M 11 / D D 05 / Y Y Y Y 2024 in the State of FL

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

- ☐ General (30G)
- ☐ Runoff (30R)
- ☐ Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M 10 / D D 01 / Y Y Y Y 2024 through M M 10 / D D 16 / Y Y Y Y 2024

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: Handfield, Larry, , ,

Signature of Treasurer: *Handfield, Larry, , ,* Date: M M 10 / D D 24 / Y Y Y Y 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only							

Image# 202410249710326653

SUMMARY PAGE
of Receipts and Disbursements

FEC **Form 3** (Revised 03/2016)

Write or Type Committee Name

Frederica S Wilson for Congress

Report Covering the Period: From: 10/01/2024 To: 10/16/2024

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	293.00	448577.44
(b) Total Contribution Refunds (from Line 20(d))	0.00	3400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	293.00	445177.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8417.25	424869.69
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8417.25	424869.69
8. Cash on Hand at Close of Reporting Period (from Line 27)	526077.73	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	15250.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

Image# 202410249710326654

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

Frederica S Wilson for Congress

Report Covering the Period: From: 10/01/2024 To: 10/16/2024

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	75.00	139786.79
(ii) Unitemized	218.00	2687.57
(iii) TOTAL of contributions from individuals ▶	293.00	142474.36
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	306103.08
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	293.00	448577.44
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	7667.77
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	293.00	456245.21

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3** (Revised 05/2016)

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	8417.25	424869.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	3400.00
21. OTHER DISBURSEMENTS	3300.00	75554.58
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	11717.25	503824.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	537501.98
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	293.00
25. SUBTOTAL (add Line 23 and Line 24)	537794.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	11717.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	526077.73

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A.
Full Name (Last, First, Middle Initial)
Graff, Sherry, , ,
Mailing Address 2516 SW 45th St
City: Cape Coral | State: FL | Zip Code: 33914-6104
FEC ID number of contributing federal political committee: C
Name of Employer: Not Employed
Occupation: Not Employed
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Election Cycle-to-Date: 575.00

Date of Receipt: 10 / 14 / 2024
Transaction ID : 5677201
Amount of Each Receipt this Period: 25.00
☐ Memo Item
* Earmarked Contribution: See Below Actblue

B.
Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address PO Box 382110
City: Cambridge | State: MA | Zip Code: 02238-2110
FEC ID number of contributing federal political committee: C C00401224
Name of Employer:
Occupation: Conduit total listed in Agg. field
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Election Cycle-to-Date: 293.00

Date of Receipt: 10 / 14 / 2024
Transaction ID : 5677201E
Amount of Each Receipt this Period: 25.00
☒ Memo Item
Note: Above Contribution earmarked through this organization.

C.
Full Name (Last, First, Middle Initial)
Williams Cohee, Teri, , ,
Mailing Address 88 Clyde St
City: Chestnut Hill | State: MA | Zip Code: 02467-2900
FEC ID number of contributing federal political committee: C
Name of Employer: OneUnited Bank
Occupation: President and CEO
Receipt For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Election Cycle-to-Date: 1200.00

Date of Receipt: 10 / 11 / 2024
Transaction ID : 5677198
Amount of Each Receipt this Period: 50.00
☐ Memo Item
* Earmarked Contribution: See Below Actblue

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A.
Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address PO Box 382110
City: Cambridge | State: MA | Zip Code: 02238-2110
FEC ID number of contributing federal political committee: C C00401224
Name of Employer:
Occupation: Conduit total listed in Agg. field
Receipt For: 2024
☐ Primary ☒ General ☐ Other (specify)
Election Cycle-to-Date: 293.00

Date of Receipt: 10 / 11 / 2024
Transaction ID : 5677198E
Amount of Each Receipt this Period: 50.00
☒ Memo Item
Note: Above Contribution earmarked through this organization.

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)
Election Cycle-to-Date

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

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

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 75.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A.
Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address PO Box 382110
City: Cambridge | State: MA | Zip Code: 02238-2110
Purpose of Disbursement: Merchant Bank Fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 06 / 2024
FEC Identification Number: C C00401224
Amount of Each Disbursement this Period: 0.40
Transaction ID : 500689503
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address PO Box 382110
City: Cambridge | State: MA | Zip Code: 02238-2110
Purpose of Disbursement: Merchant Bank Fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 13 / 2024
FEC Identification Number: C C00401224
Amount of Each Disbursement this Period: 6.13
Transaction ID : 500689502
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address PO Box 382110
City: Cambridge | State: MA | Zip Code: 02238-2110
Purpose of Disbursement: Merchant Bank Fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 16 / 2024
FEC Identification Number: C C00401224
Amount of Each Disbursement this Period: 5.06
Transaction ID : 500689500
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 11.59

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Ave SE

City: Washington | State: DC | Zip Code: 20003-4007

Purpose of Disbursement: Monthly Retainer for Fundraising Services

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 03 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 4500.00

Transaction ID : 500689544

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
AT&T

Mailing Address PO Box 5014

City: Carol Stream | State: IL | Zip Code: 60197-5014

Purpose of Disbursement: Monthly AT&T Mobility Payment for campaign phone

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 04 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 158.43

Transaction ID : 500689536

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Bank of America Corporation

Mailing Address 730 15th St NW

City: Washington | State: DC | Zip Code: 20005-1050

Purpose of Disbursement: Wire transfer fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 16 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 30.00

Transaction ID : 500689546

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4688.43

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A. Full Name (Last, First, Middle Initial)
MDW Communications

Mailing Address 51 N NOB HILL Rd
Ste 151

City: Plantation | State: FL | Zip Code: 33324

Purpose of Disbursement: Monthly retainer for communication services

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 16 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 3500.00

Transaction ID : 500689545

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy St SE

City: Washington | State: DC | Zip Code: 20003-4006

Purpose of Disbursement: Membership dues for National Democratic Club

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 03 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 70.00

Transaction ID : 500689534

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy St SE

City: Washington | State: DC | Zip Code: 20003-4006

Purpose of Disbursement: Membership dues for National Democratic Club

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2024
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 10 / 03 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 10.00

Transaction ID : 500689535

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3580.00

TOTAL This Period (last page this line number only) ▶ 8280.02

Image# 202410249710326661

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

A.
Full Name (Last, First, Middle Initial)
Emilia Sykes for Congress
Mailing Address PO Box 1347
City: Akron | State: OH | Zip Code: 44309-1347
Purpose of Disbursement: Contribution.
Candidate Name: Sykes, Emilia, , ,
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 13
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 10 / 02 / 2024
FEC Identification Number: C C00801274
Amount of Each Disbursement this Period: 3300.00
Transaction ID : 500689533
☐ Memo Item Independent Expenditure (S) - Elec To Date $3300.00 Dissemination

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3300.00

TOTAL This Period (last page this line number only) ▶ 3300.00

Image# 202410249710326662

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- ☐ 13a
- ☒ 13b

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Transaction ID : 2066758L

LOAN SOURCE Full Name (Last, First, Middle Initial)
Wilson, Frederica, S, ,

☐ Memo Item

Mailing Address
1018 NW 204th St

City: Miami | State: FL | ZIP Code: 33169-2457

Election: 2010
- ☒ Primary
- ☐ General
- ☐ Other (specify) ▼

☒ Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250.00	0.00	250.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
03/13/2009	No due date	None % (apr)	☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	250.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 202410249710326663

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- ☐ 13a
- ☒ 13b

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Transaction ID : 2070556L

LOAN SOURCE Full Name (Last, First, Middle Initial)
Wilson, Frederica, S, ,

☐ Memo Item

Election: 2010
- ☒ Primary
- ☐ General
- ☐ Other (specify) ▼

Mailing Address
1018 NW 204th St

City	State	ZIP Code
Miami	FL	33169-2457

☒ Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4500.00	0.00	4500.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
06/30/2009	No Due Date	None % (apr)	☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	4500.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 202410249710326664

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- ☐ 13a
- ☒ 13b

NAME OF COMMITTEE (In Full)
Frederica S Wilson for Congress

Transaction ID : 2070559L

LOAN SOURCE Full Name (Last, First, Middle Initial)
Wilson, Frederica, S, ,

☐ Memo Item

Mailing Address
1018 NW 204th St

City: Miami | State: FL | ZIP Code: 33169-2457

Election: 2010
- ☒ Primary
- ☐ General
- ☐ Other (specify) ▼

☒ Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	39500.00	10500.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
08/20/2010	None	None % (apr)	☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	10500.00
TOTALS This Period (last page in this line only) ▶	15250.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.