

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

ADDRESS (number and street)

214 South Bronough Street

☐Check if different
than previously
reported. (ACC)

Tallahassee

FL

32302

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005561

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)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
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2010

through

08

31

2010

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

Alma Gonzalez

Signature of Treasurer

Electronically Filed by Alma Gonzalez

Date

09

21

2011

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

Transfers received from the DNC, DCCC, DSCC and candidate committees, not including ASDC/Dollars for Democrats and DNC Victory Fund, were not for joint fundraising. None of the transfer in money received from the DNC or DCCC was used in the payments made for exempt activities. None of the expenses listed on Line 21b were public communications or FEA activities. The payments listed on H4, including all consulting fees, were administrative/committee fundraising expenses and not FEA nor in connection with a federal election. Payroll and all related expenses reported on Schedule H4 were for staff that did not spend more than 25% of their time on FEA or in connection with a federal election-
.....

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2010		762421.56
(b) Cash on Hand at Beginning of Reporting Period	1428099.23	
(c) Total Receipts (from Line 19)	708680.71	2819738.77
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2136779.94	3582160.33
7. Total Disbursements (from Line 31)	612592.84	2057973.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1524187.10	1524187.10
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)	18541.50	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	8	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	W	Y
0	8	3	1	2	0	1	0

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)	252186.35	712048.37
(ii) Unitemized	7767.00	53910.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)	259953.35	765958.79
(b) Political Party Committees	71681.34	506295.04
(c) Other Political Committees (such as PACs)	15000.00	96400.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	346634.69	1368653.83
12. Transfers From Affiliated/Other Party Committees	339865.00	908285.18
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)	435.90	32471.84
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	890.08	890.08
17. Other Federal Receipts (Dividends, Interest, etc.)	20855.04	48121.88
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	461315.96
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	461315.96
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	708680.71	2819738.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	708680.71	2358422.81

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	18954.39	196015.79	
(ii) Non-Federal Share.....	71982.00	829639.11	
(b) Other Federal Operating Expenditures.....	414026.51	572488.90	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	504962.90	1598143.80	
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 Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (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	2650.00	
(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	2650.00	
29. Other Disbursements.....	20000.00	300000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared 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	87629.94	157179.43	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	87629.94	157179.43	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	612592.84	2057973.23	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	540610.84	1228334.12	

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)	346634.69	1368653.83
34. Total Contribution Refunds (from Line 28(d))	0.00	2650.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	346634.69	1366003.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	432980.90	768504.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	435.90	32471.84
38. Net Operating Expenditures (subtract Line 37 from Line 36)	432545.00	736032.85

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 232

(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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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Nelson L. Adams, M.D..

Mailing Address 1098 NE 95th St

City

Miami Shores

State

FL

Zip Code

33138-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer
Access Health SolutionsOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	0

Transaction ID: C4733376

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Judith Adler

Mailing Address 4549 Pine Tree Dr

City

Miami Beach

State

FL

Zip Code

33140-3133

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

Transaction ID: C4771453

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Martin Akerman

Mailing Address 14323 Sports Club Way

City

Orlando

State

FL

Zip Code

32837-6986

FEC ID number of contributing
federal political committee.

C

Name of Employer
Center for Urban Transpor-
tation ResearOccupation
Transportation Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	0

Transaction ID: C4732874

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

12250.00

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 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Nasir Alam

Mailing Address 15020 SW 74th Ave

City

Palmetto Bay

State

FL

Zip Code

33158-2123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733382

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gregory N Arkin

Mailing Address 1020 N Shore Dr

City

Miami Beach

State

FL

Zip Code

33141-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mintz Trupman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733367

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Willis Arndt

Mailing Address 1170 Kane Concourse
Ste 402

City

Bay Harbor Islands

State

FL

Zip Code

33154-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer
MerchantAdvantage, LLC

Occupation
Internet Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732870

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 9 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Caroline Asher

Mailing Address 381 W Mallory Cir

City

Delray Beach

State

FL

Zip Code

33483-5279

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4772735

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Jeanne A. Baker

Mailing Address 2121 Ponce De Leon Blvd
Ste 720

City

Coral Gables

State

FL

Zip Code

33134-5222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Becker Consulting Services
Florida Ven

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733369

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Linda Balboa

Mailing Address 1020 Alfonso Ave

City

Coral Gables

State

FL

Zip Code

33146-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer
LaBelle Beauty School

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733312

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

12250.00

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 10 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Joan S. Balkin

Mailing Address 611 86th St

City

Miami Beach

State

FL

Zip Code

33141-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755539

Amount of Each Receipt this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Carla Maria Barrow

Mailing Address 2434 SW 19th Ter

City

Miami

State

FL

Zip Code

33145-2518

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762015

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Samuel P. Bell, III

Mailing Address 1298 Millstream Rd

City

Tallahassee

State

FL

Zip Code

32312-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pennington Law

Occupation

lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: C4728827

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Christopher W. Benjamin

Mailing Address 20442 NW 7th Ct

City

Miami

State

FL

Zip Code

33169-2382

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alexander & Baldwin

Occupation
Senior VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731462

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

David Bennett

Mailing Address 10305 NW 41st St
Ste 207

City

Doral

State

FL

Zip Code

33178-2982

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733373

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

David K Black

Mailing Address 3841 NE 17th Ave

City

Oakland Park

State

FL

Zip Code

33334-5417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762011

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Rachel Blechman

Mailing Address 5250 SW 84th St

City

Miami

State

FL

Zip Code

33143-8434

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLLAND & KNIGHT, LLP

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4754676

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Richard Boylan

Mailing Address 2950 Alton Dr

City

St Pete Beach

State

FL

Zip Code

33706-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771462

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Deena Breed

Mailing Address 1020 W Par St

City

Orlando

State

FL

Zip Code

32804-3663

FEC ID number of contributing
federal political committee.

C

Name of Employer
Orange Cycle

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 2 / 2 0 1 0

Transaction ID: C4723597

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

525.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Annabel Brewster

Mailing Address PO Box 822806

City

Pembroke Pines

State

FL

Zip Code

33082-2806

FEC ID number of contributing
federal political committee.

C

Name of Employer
MGN Healthcare

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: C4731443

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Adam Brum

Mailing Address 5401 Bayshore Blvd
Apt G

City

Tampa

State

FL

Zip Code

33611-4129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morgan & Morgan

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4731870

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Celeste C. Bush

Mailing Address 412 Farmers Market Rd

City

Fort Pierce

State

FL

Zip Code

34982-8228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed/ St. Lucie
DEC

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4755205

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 14 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Campaign Account of Marline Bastien

Mailing Address PO Box 381255

City

Miami

State

FL

Zip Code

33238-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: C4729404

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Ana Maria Campos

Mailing Address PO Box 21511

City

Fort Lauderdale

State

FL

Zip Code

33335-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Myles Krieger, MD

Occupation

Medical Billing Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4732894

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Ana Maria Campos

Mailing Address PO Box 21511

City

Fort Lauderdale

State

FL

Zip Code

33335-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Myles Krieger, MD

Occupation

Medical Billing Healthcare

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771608

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1725.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **C4729404**

The receipt from the Campaign Account of Marlene Bastien was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

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

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

FOR LINE NUMBER: PAGE 16 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Charles D. Carroll

Mailing Address 13637 Deering Bay Dr
Apt 272

City State Zip Code
Coral Gables FL 33158-2816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771547

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Georgette Carroll

Mailing Address 1970 S Dixie Hwy
R5

City State Zip Code
West Palm Beach FL 33401-7700

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tax Collector Palm Beach
County

Occupation
Goddess of Excellence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 7 / 2 0 1 0

Transaction ID: C4728831

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Pablo L. Cejas

Mailing Address PO Box 565640

City State Zip Code
Miami FL 33256-5640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Former Ambassador

Occupation
Health Care Provider

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762003

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

11250.00

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 17 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Paul L. Cejas

Mailing Address 420 Lincoln Rd
Ste 432

City State Zip Code
Miami Beach FL 33139-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLC Investments Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762029

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Wei Chen

Mailing Address 21200 NE 38th Ave
Apt 2703

City State Zip Code
Miami FL 33180-3863

FEC ID number of contributing
federal political committee.

C

Name of Employer
GHE

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4755283

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Michael Cohen

Mailing Address 1800 S Ocean Blvd
apt 1006

City State Zip Code
Pompano Beach FL 33062-7918

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4731894

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

25000.00

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 18 / 232

(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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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jonathan Cole

Mailing Address 1305 Ponce De Leon Dr

City

Fort Lauderdale

State

FL

Zip Code

33316-1364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	0

Transaction ID: C4771504

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gregory Collier

Mailing Address 10297 Osprey Trce

City

West Palm Beach

State

FL

Zip Code

33412-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	0

Transaction ID: C4733377

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Thomas Cornish

Mailing Address 1411 Mendavia Ave

City

Coral Gables

State

FL

Zip Code

33146-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer
SeitlinOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	0

Transaction ID: C4728845

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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 19 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Tereza Correa

Mailing Address 18671 Collins Ave
Apt 1404

City State Zip Code
Sunny Isles Beach FL 33160-7222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Acritica

Occupation
Vice president

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731461

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Imtiaz Crown

Mailing Address 45 Round Thorn Dr

City State Zip Code
Palm Coast FL 32164-6931

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731467

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Courtney Cunningham

Mailing Address 10873 SW 59th Ct

City State Zip Code
Miami FL 33156-4155

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Cunningham Group

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734109

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

3250.00

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 20 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Vincent E. Damian, Jr.

Mailing Address 1115 N Greenway Dr

City

Coral Gables

State

FL

Zip Code

33134-4760

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733358

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Robin Dobson

Mailing Address 1546 Gulfview Dr

City

Maitland

State

FL

Zip Code

32751-6374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755497

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Paul M. Doolittle

Mailing Address 15663 Waterville Rd

City

Jacksonville

State

FL

Zip Code

32226-1551

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4754716

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

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 21 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Yolanda Escollies

Mailing Address 5333 Collins Ave
Apt 1106

City State Zip Code
Miami Beach FL 33140-3248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: C4731454

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Joesph Lee Falk

Mailing Address 1770 Micanopy Ave

City State Zip Code
Coconut Grove FL 33133-3323

FEC ID number of contributing
federal political committee.

C

Name of Employer
Akerman Senterfitt

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771586

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Klara Farkas

Mailing Address 3547 Saint Gaudens Rd

City State Zip Code
Coconut Grove FL 33133-6530

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4754681

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

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 22 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Alan H. Fein

Mailing Address 525 Allendale Rd

City

Key Biscayne

State

FL

Zip Code

33149-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4734371

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Aaron Finesilver

Mailing Address 1148 SW 22nd Ter

City

Miami

State

FL

Zip Code

33129-2718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lydecker Diaz

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771532

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Judith Fried

Mailing Address 7422 Corkwood Cir

City

Tamarac

State

FL

Zip Code

33321-2620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Pediatric Physical Therapist/

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731455

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2500.00

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 23 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Amy E. Furness

Mailing Address 7530 Coquina Dr

City

North Bay Village

State

FL

Zip Code

33141-4025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carlton FieldsOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733380

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Elberg Gelin

Mailing Address 5901 Abbey Rd

City

Tamarac

State

FL

Zip Code

33321-4110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seitlin BenefitsOccupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: C4731440

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mark Gerstle

Mailing Address 10778 Nashville Dr

City

Hollywood

State

FL

Zip Code

33026-4900

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733334

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 24 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Mark D Gilbert

Mailing Address 39 White Pine Canyon Rd

City

Park City

State

UT

Zip Code

84060-6508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lehman Brothers

Occupation

Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771535

Amount of Each Receipt this Period

5900.00

B.

Full Name (Last, First, Middle Initial)

Oliver Gilbert, III

Mailing Address 3261 NW 208th Ter

City

Opa Locka

State

FL

Zip Code

33056-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rudent McClosky

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755535

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Alan Goldfarb

Mailing Address 100 SE 2nd St
International Place 39th Floor

City

Miami

State

FL

Zip Code

33131-2100

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goldfarb, PA

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4755265

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

11150.00

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 25 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Janice Mekula Golding

Mailing Address 6574 N State Road 7
354

City State Zip Code
Coconut Creek FL 33073-3625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 1 0

Transaction ID: C4728832

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Lisa Council Gonzalez

Mailing Address 1216 Terrace St

City State Zip Code
Tallahassee FL 32303-6427

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4754713

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Seth Gordon

Mailing Address 150 SE 2nd Ave
Ste 600

City State Zip Code
Miami FL 33131-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gordon Reyes & Company

Occupation
Public Relations Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734123

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

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 26 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Stephanie Grutman

Mailing Address 19 Chestnut Cir

City

Hollywood

State

FL

Zip Code

33026-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Florida Democratic Party

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755537

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Lee F. Hager

Mailing Address 3015 Sorrel Ct

City

Weston

State

FL

Zip Code

33331-3006

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHERN WINE & SPIRITS
OF AMERICA

Occupation
Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732868

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Gregory Haile

Mailing Address 410 NE 94th St

City

Miami Shores

State

FL

Zip Code

33138-2846

FEC ID number of contributing
federal political committee.

C

Name of Employer
Berger Singerman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4771116

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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 27 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Nina Hamilton- Lee

Mailing Address 119 SW 23rd Rd

City

Miami

State

FL

Zip Code

33129-2016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Silver Financial

Occupation

Supervisor of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4755260

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Siobhan Harley

Mailing Address 804 Monte Cristo Blvd

City

Saint Petersburg

State

FL

Zip Code

33715-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Campaign Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 1 0

Transaction ID: C4730170

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey Heebner

Mailing Address 3 Island Ave

City

Miami Beach

State

FL

Zip Code

33139-1352

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Miami

Occupation

Director of Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: C4731448

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **C4730170**

The receipt from Siobhan Harley was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

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

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

FOR LINE NUMBER: PAGE 29 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Victoria Hernandez

Mailing Address 300 NE 2nd Ave

City

Miami

State

FL

Zip Code

33132-2204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miami Dade Community College

Occupation

Director of Governmental Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771487

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Michael Hoffman

Mailing Address 455 SE 14th St

City

Dania Beach

State

FL

Zip Code

33004-4629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr. Howard Hoffman DDS

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: C4728833

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Virginia A. Hojabri

Mailing Address 735 NE 88th St

City

Miami

State

FL

Zip Code

33138-3322

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771589

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1550.00

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 30 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jessica Hollander

Mailing Address 3138 SW 50th St

City

Fort Lauderdale

State

FL

Zip Code

33312-6981

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sloan Kettering

Occupation
Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762022

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Dan Holnes Campaign Holnes

Mailing Address 4325 W Sunrise Blvd

City

Plantation

State

FL

Zip Code

33313-6749

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dan Holnes

Occupation
Campaign Account

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: C4729393

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

David Hoskinson

Mailing Address 1901 N Ocean Blvd
8 e

City

Fort Lauderdale

State

FL

Zip Code

33305-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pediatrix

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771621

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

B. Form/Schedule : **SA11AI**
Transaction ID : **C4729393**

The receipt from Dan Holnes was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 232

(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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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Hong Huang

Mailing Address 21200 NE 38th Ave
Apt 2703City State Zip Code
Miami FL 33180-3863FEC ID number of contributing
federal political committee.**C**Name of Employer
GHEOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	9	/	2	0	1	0

Transaction ID: C4755281

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Mamie Joeveer

Mailing Address 730 NE 90th St
Unit 101City State Zip Code
Miami FL 33138-3201FEC ID number of contributing
federal political committee.**C**Name of Employer
Miami HeraldOccupation
Freelance Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	1	0

Transaction ID: C4731459

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Brenda Johnson

Mailing Address 1201 SW Golden Ave

City State Zip Code
Arcadia FL 34266-4211FEC ID number of contributing
federal political committee.**C**Name of Employer
DeSoto County School DistrictOccupation
Assistant Director E.S.E.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	4	/	2	0	1	0

Transaction ID: C4731457

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

10750.00

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

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Charles Johnson

Mailing Address 12301 NW 7th St

City

Plantation

State

FL

Zip Code

33325-1729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734208

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Noel Johnson

Mailing Address 3976 Executive Dr

City

Palm Harbor

State

FL

Zip Code

34685-1024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755541

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Anita Jones

Mailing Address 6818 Derrick Dr

City

Orlando

State

FL

Zip Code

32818-4038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4755268

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3250.00

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 34 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Karen Jones

Mailing Address 2748 Saint Charles St

City

Fort Myers

State

FL

Zip Code

33916-4033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Agency for Persons With
Disabilities

Occupation

Government Consultant I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731456

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Manuel Kadre

Mailing Address 5345 Hammock Dr

City

Coral Gables

State

FL

Zip Code

33156-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
CC1 Companies

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4772689

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Tanzer Kalayci

Mailing Address 4921 NE 28th Ave

City

Lighthouse Point

State

FL

Zip Code

33064-7915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733381

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5500.00

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 35 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Arden Karson

Mailing Address 9550 Broadview Ter

City

Bay Harbor Islands

State

FL

Zip Code

33154-1932

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Karson Organization

Occupation

Real Estate Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762032

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Markenzy Lapointe

Mailing Address 16246 SW 18th St
Suite 2800

City

Miramar

State

FL

Zip Code

33027-4456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boies, Schiller & Flexner
LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733363

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Warren Lee

Mailing Address 7243 Glendyne Dr S

City

Jacksonville

State

FL

Zip Code

32216-7107

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Florida

Occupation

Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771624

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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 36 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Norman Levine

Mailing Address 11401 Biscayne Blvd
#107

City State Zip Code
North Miami FL 33181-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ribotsky Levine

Occupation
lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: C4731442

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Robert N. Lichtenstein

Mailing Address 1031 Silverbell St

City State Zip Code
Hollywood FL 33019-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hollywood Medical Supply
Co

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733375

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Onier Llopiz

Mailing Address 102 NW 97th St

City State Zip Code
Miami Shores FL 33150-1735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lydecker Diaz

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: C4732885

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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 37 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lori Edwards Campaign

Mailing Address PO Box 280

City

Eagle Lake

State

FL

Zip Code

33839-0280

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: C4729403

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Clotilde Luce

Mailing Address 301 Ocean Dr
Apt 508

City

Miami Beach

State

FL

Zip Code

33139-6937

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4734363

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Hugh Lumpkin

Mailing Address 6805 SW 96th St

City

Miami

State

FL

Zip Code

33156-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Verploeg & Lumpkin

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762001

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **C4729403**

The receipt from The Lori Edwards Campaign was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

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

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

FOR LINE NUMBER: PAGE 39 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sheryl Lumpkins

Mailing Address 2711 NW 24th Ave

City

Oakland Park

State

FL

Zip Code

33311-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733331

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Robert A Mandell

Mailing Address PO Box 2106

City

Winter Park

State

FL

Zip Code

32790-2106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: C4771450

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Mike Maner

Mailing Address 808 Brickell Key Dr
Apt 2707

City

Miami

State

FL

Zip Code

33131-2691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Delta Dental

Occupation
Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732866

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

11250.00

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 40 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Evan Marcus

Mailing Address 6058 NW 71st Ter

City

Parkland

State

FL

Zip Code

33067-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pediatric Associates

Occupation
Pediatrician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734112

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gwen Margolis

Mailing Address 2 Grove Isle Dr

City

Miami

State

FL

Zip Code

33133-4102

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Florida

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733022

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Carlos Martinez

Mailing Address 2281 SW 21st St

City

Miami

State

FL

Zip Code

33145-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carlos Martinez

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4754677

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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 41 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sandra McAuley

Mailing Address 3160 Quantum Lakes Dr

City

Boynton Beach

State

FL

Zip Code

33426-8300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Findler & Findler

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755498

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Beth McCall

Mailing Address 7073 SE 12th Cir

City

Ocala

State

FL

Zip Code

34480-6656

FEC ID number of contributing
federal political committee.

C

Name of Employer
Christian School

Occupation
Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: C4726574

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Robert Mencia

Mailing Address 7501 NW 4th St
Ste 204

City

Plantation

State

FL

Zip Code

33317-2237

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Real Estate Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732873

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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 42 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Joan Misuraca

Mailing Address 4779 Collins Ave
Apt 3706

City State Zip Code
Miami Beach FL 33140-3260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Misuraca Consulting

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755542

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Hilton Napoleon II, II

Mailing Address 1014 Pizarro St

City State Zip Code
Coral Gables FL 33134-2585

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755554

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Lynda Napolitano

Mailing Address 3900 Galt Ocean Dr

City State Zip Code
Fort Lauderdale FL 33308-6600

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733365

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Marissa Nestor

Mailing Address 3026 N Bay Rd

City

Miami Beach

State

FL

Zip Code

33140-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771551

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Michael A Nocero, Jr. M.D.

Mailing Address 103 Satsuma Dr

City

Altamonte Springs

State

FL

Zip Code

32714-6505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Central Florida Cardiology

Occupation
Cardiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4754712

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Angelica R Palank

Mailing Address 70 Bay Colony Ln

City

Fort Lauderdale

State

FL

Zip Code

33308-2004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733384

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

4250.00

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Arva Parks McCabe

Mailing Address 1601 S Miami Ave
PH 7

City State Zip Code
Miami FL 33129-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arva Parks & Co.

Occupation
Historian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733383

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Clara Pascal

Mailing Address 1240 Mariola Ct

City State Zip Code
Coral Gables FL 33134-6264

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pascal International

Occupation
Foundation Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734210

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ed Pascoe

Mailing Address 185 S Hibiscus Dr
Apt 5

City State Zip Code
Miami Beach FL 33139-5178

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pascoe & Co. Inc.

Occupation
Antique Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733330

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

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 45 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

John H Pell

Mailing Address 10340 SW 82nd Ave

City

Miami

State

FL

Zip Code

33156-2516

FEC ID number of contributing
federal political committee.

C

Name of Employer
J. Pell & Associates Inc.

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733364

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gera Peoples

Mailing Address 755 NW 61st St

City

Miami

State

FL

Zip Code

33127-1131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boies, Schiller, & Flexner

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733370

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Eugene K. Pettis

Mailing Address 10390 Golden Eagle Ct

City

Plantation

State

FL

Zip Code

33324-2161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733386

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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
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FOR LINE NUMBER: PAGE 46 / 232

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Laurinus Pierre

Mailing Address 8260 NE 2nd Ave

City

Miami

State

FL

Zip Code

33138-3808

FEC ID number of contributing
federal political committee.

C

Name of Employer
GMHETC

Occupation

Public Health Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4755266

Amount of Each Receipt this Period

7500.00

B.

Full Name (Last, First, Middle Initial)

Abigail Pollak

Mailing Address 3 Grove Isle Dr
Apt 401

City

Miami

State

FL

Zip Code

33133-4109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4771442

Amount of Each Receipt this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

Samuel Eugene Poole, III

Mailing Address 702 N Rio Vista Blvd

City

Fort Lauderdale

State

FL

Zip Code

33301-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Berger Singerman

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762009

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

18000.00

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 47 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Maria A Prio

Mailing Address 650 Ocean Dr
Apt 9E

City State Zip Code
Key Biscayne FL 33149-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Translator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731458

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Diana Ragbeer

Mailing Address 4041 Collins Ave
Apt 1604

City State Zip Code
Miami Beach FL 33140-3762

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Childrens Trust

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771508

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mark Raymond

Mailing Address 545 Sabal Palm Rd

City State Zip Code
Miami FL 33137-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Broad and Cassel

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4733379

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Judith Redden

Mailing Address 145 Blackwater Cir

City

Penhook

State

VA

Zip Code

24137-5260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4772732

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Benjamin Reid

Mailing Address 3840 Alhambra Ct

City

Coral Gables

State

FL

Zip Code

33134-6230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carlton Fields Attorneys
at Law

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733020

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Desiree A Reynolds

Mailing Address 3797 Coventry Ln

City

Boca Raton

State

FL

Zip Code

33496-4062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4772730

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

25000.00

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 49 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Eva Ritvo

Mailing Address 3026 N Bay Rd

City

Miami Beach

State

FL

Zip Code

33140-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4771512

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Maria E Roberts

Mailing Address 27700 SW 164th Ave

City

Homestead

State

FL

Zip Code

33031-2846

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZST

Occupation
Development Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755533

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

John Roettger

Mailing Address 501 SW 37th Ave

City

Miami

State

FL

Zip Code

33135-2538

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733374

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

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 50 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jesus E. Roiz

Mailing Address 358 SW 22nd Rd

City

Miami

State

FL

Zip Code

33129-1912

FEC ID number of contributing
federal political committee.

C

Name of Employer
FPL

Occupation

electrical engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: C4732881

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ron Klein Campaign Fund

Mailing Address 301 NE 51st St
Ste 4150

City

Boca Raton

State

FL

Zip Code

33431-4933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11036.35

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4755094

Amount of Each Receipt this Period

11036.35

C.

Full Name (Last, First, Middle Initial)

Felix Rosabal

Mailing Address 9200 SW 80th Ter

City

Miami

State

FL

Zip Code

33173-4159

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

candidate

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733359

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

11536.35

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 51 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Eugene A. Rostov

Mailing Address 12051 SW 69th Pl

City

Miami

State

FL

Zip Code

33156-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baker McKenzie

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771555

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gladys Rustan-Hernando

Mailing Address 5760 Lagorce Dr

City

Miami Beach

State

FL

Zip Code

33140-2142

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOS Healthcare Inc

Occupation
Project Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771601

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Kathleen P Ryan

Mailing Address 3468 Anguilla Way
Apt 140

City

Naples

State

FL

Zip Code

34119-1615

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 ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771463

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 52 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jan Sagett

Mailing Address 25251 Galashields Cir

City

Bonita Springs

State

FL

Zip Code

34134-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731463

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gillian Sandler

Mailing Address 5400 NE 4th Ct
Ste 4

City

Miami

State

FL

Zip Code

33137-2633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Todobebe, Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733336

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Stewart Schaffer

Mailing Address 5340 W Kennedy Blvd
Unit 516

City

Tampa

State

FL

Zip Code

33609-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer
BayCare

Occupation
Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4731872

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Ivonne Schulman

Mailing Address 1540 Stillwater Dr

City

Miami Beach

State

FL

Zip Code

33141-1033

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Miami

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733333

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Frank Scruggs

Mailing Address 923 Hyacinth Dr

City

Delray Beach

State

FL

Zip Code

33483-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Berger Singerman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762014

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Donna Shalala

Mailing Address 8565 Old Cutler Rd

City

Coral Gables

State

FL

Zip Code

33143-6217

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Miami

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4771479

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Robert Siegel

Mailing Address 15621 SW 12th St

City

Pembroke Pines

State

FL

Zip Code

33027-2238

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bilzin Law

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734117

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Barry S. Sinoff

Mailing Address 1136 W Kesley Ln

City

Saint Johns

State

FL

Zip Code

32259-3257

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4731868

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey Solomon

Mailing Address 13865 S Dixie Hwy
Ste 307

City

Miami

State

FL

Zip Code

33176-7221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Chiropractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731464

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Neal R. Sonnett, PA

Mailing Address 2 S Biscayne Blvd

One Biscayne Tower, Suite 2600

City

Miami

State

FL

Zip Code

33131-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Neal R. Sonnett, P.A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: C4732880

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

William H. Stager, D.O.

Mailing Address 311 Golf Rd

Ste 1100

City

West Palm Beach

State

FL

Zip Code

33407-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer
William H. Stager, D.O.

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: C4728825

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Joel Stedman

Mailing Address 1800 Sunset Harbour dr 2102

City

Miami Beach

State

FL

Zip Code

33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
2 by 2 inc

Occupation
Bar Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: C4728824

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Robert Stein

Mailing Address 3903 Ortega Blvd

City

Jacksonville

State

FL

Zip Code

32210-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: C4731063

Amount of Each Receipt this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

Leslie Steinlieb

Mailing Address 90 Edgewater Dr
Apt 1101

City

Coral Gables

State

FL

Zip Code

33133-6992

FEC ID number of contributing
federal political committee.

C

Name of Employer
Editorial Services

Occupation
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5180.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734122

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Pamela Strickland

Mailing Address 3939 N Ocean Dr

City

Singer Island

State

FL

Zip Code

33404-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer
School Investment Propert-
ies

Occupation
Real Estate Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: C4731441

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

15250.00

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Emil Stuermer

Mailing Address 10411 Micanopy St

City

New Port Richey

State

FL

Zip Code

34655-2159

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4731871

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rosa Sugranes

Mailing Address 685 Harbor Ln

City

Key Biscayne

State

FL

Zip Code

33149-1713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iberia Tiles

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4734366

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Lori A Summers

Mailing Address 3675 High Pine Dr

City

Coral Springs

State

FL

Zip Code

33065-6013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762005

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

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 58 / 232

(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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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Brian O. Sutter

Mailing Address 1297 Campbell St

City

Port Charlotte

State

FL

Zip Code

33953-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	0

Transaction ID: C4754715

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

John O. Sutton

Mailing Address 3796 NE 209th Ter

City

Miami

State

FL

Zip Code

33180-3784

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Transaction ID: C4771518

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Gibson Sylvestre

Mailing Address po box 93741

City

Margate

State

FL

Zip Code

33093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Infinite Possibilities

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	0

Transaction ID: C4771626

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1050.00

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 59 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

The Markham Group, LLC

Mailing Address 860 East Park Avenue

City

Tallahassee

State

FL

Zip Code

32301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: C4729409

Amount of Each Receipt this Period

450.00

B.

Full Name (Last, First, Middle Initial)

Geraldine F. Thompson

Mailing Address 9626 Leaside Ct

City

Windermere

State

FL

Zip Code

34786-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Florida/Legisla-
ture

Occupation

State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732872

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

David Keith Tobin

Mailing Address 6801 SW 147th Ave
Apt 4F

City

Miami

State

FL

Zip Code

33193-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fowler White

Occupation

Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732867

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SA11AI**
Transaction ID : **C4729409**

The receipt from The Markham Group was for voter file purchase as fair market value. The Committee assessed the usual and normal charge for the goods and/or services provided. The market value was set after analyzing comparable vendors in the surrounding area/market.

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

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

FOR LINE NUMBER: PAGE 61 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Donna Mae Litowitz Trust

Mailing Address 5500 Collins Ave
Apt 503

City State Zip Code
Miami Beach FL 33140-2537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
TRUST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4772683

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Kathleen Valbrun

Mailing Address 9611 W Calusa Club Dr

City State Zip Code
Miami FL 33186-1505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4762025

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Paul Velez

Mailing Address 5281 SW 141st Ter

City State Zip Code
Miramar FL 33027-5980

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733368

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

5500.00

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 62 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Brenton N. Verploeg

Mailing Address 1980 Tigertail Ave

City

Coconut Grove

State

FL

Zip Code

33133-3240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Verploeg & Lumpkin

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4761997

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Forest Wade

Mailing Address 2273 6th Ave SE

City

Vero Beach

State

FL

Zip Code

32962-8301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Steak & Shake

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4734368

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Kirk Wager

Mailing Address 3250 Mary St
302

City

Miami

State

FL

Zip Code

33133-5232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wager Law

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4734376

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

12300.00

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 63 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Kathleen Weil

Mailing Address 8251 Ponce De Leon Rd

City

Miami

State

FL

Zip Code

33143-8620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733362

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Michael Weinberg

Mailing Address 2430 W Oakland Park Blvd

City

Oakland Park

State

FL

Zip Code

33311-1424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gateway Insurance

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4771444

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Theodore Weinreich

Mailing Address 1415 20th St
Apt 104

City

Miami Beach

State

FL

Zip Code

33139-1447

FEC ID number of contributing
federal political committee.

C

Name of Employer
Essilor of America

Occupation
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4733372

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

3000.00

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Andrew H. Weinstein

Mailing Address 5507 NW 58th Ave
Suite 103

City State Zip Code
Coral Springs FL 33067-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weinstein Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4734209

Amount of Each Receipt this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Matt Willhite

Mailing Address 15820 Rolling Meadows Cir

City State Zip Code
Wellington FL 33414-9054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Palm Beach County

Occupation
Fieman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 1 0

Transaction ID: C4731465

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Michael D. Winer

Mailing Address 6319 Brandon St

City State Zip Code
West Palm Beach FL 33418-1492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Andover Securities Co.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C4755499

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Alec Wisch

Mailing Address 199 Helios Dr

City

Jupiter

State

FL

Zip Code

33477-7341

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wisch and Jackson Co. of
Florida

Occupation

Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C4732869

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Maria Wizel

Mailing Address 16468 NW 86th Ct

City

Hialeah

State

FL

Zip Code

33016-6145

FEC ID number of contributing
federal political committee.

C

Name of Employer
Confetti Contract Fabrics

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4771530

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

252186.35

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785819

Amount of Each Receipt this Period

3220.00

* In-Kind: Voter File Access

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785827

Amount of Each Receipt this Period

2881.50

* In-Kind: Rent

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785830

Amount of Each Receipt this Period

6249.00

* In-Kind: Rent

SUBTOTAL of Receipts This Page (optional)

12350.50

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785832

Amount of Each Receipt this Period

2140.00

* In-Kind: Rent

B.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785833

Amount of Each Receipt this Period

269.66

* In-Kind: Utilities

C.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785835

Amount of Each Receipt this Period

165.47

* In-Kind: Utilities

SUBTOTAL of Receipts This Page (optional)

2575.13

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785836

Amount of Each Receipt this Period

1341.59

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785840

Amount of Each Receipt this Period

2040.93

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785845

Amount of Each Receipt this Period

1197.90

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

4580.42

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785847

Amount of Each Receipt this Period

1258.96

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785851

Amount of Each Receipt this Period

1236.15

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785853

Amount of Each Receipt this Period

1490.92

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

3986.03

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 70 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785854

Amount of Each Receipt this Period

1419.68

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785857

Amount of Each Receipt this Period

1605.67

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785860

Amount of Each Receipt this Period

649.93

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

3675.28

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 71 / 232

(check only one)

<input type="checkbox"/> 11a	<input checked="" 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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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

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

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	0

Transaction ID: C4785863

Amount of Each Receipt this Period

1334.40

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

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

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	0

Transaction ID: C4785868

Amount of Each Receipt this Period

1147.28

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

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

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	0

Transaction ID: C4785872

Amount of Each Receipt this Period

1236.15

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

3717.83

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 72 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4785876

Amount of Each Receipt this Period

1359.91

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785838

Amount of Each Receipt this Period

1650.68

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785843

Amount of Each Receipt this Period

2040.93

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

5051.52

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 73 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785846

Amount of Each Receipt this Period

1197.91

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785849

Amount of Each Receipt this Period

1370.49

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785856

Amount of Each Receipt this Period

2129.47

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

4697.87

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 74 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785859

Amount of Each Receipt this Period

1605.68

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785862

Amount of Each Receipt this Period

1229.99

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785865

Amount of Each Receipt this Period

1344.39

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

4180.06

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 75 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785870

Amount of Each Receipt this Period

1584.74

* In-Kind: Salary

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785875

Amount of Each Receipt this Period

655.61

* In-Kind: Salary

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785878

Amount of Each Receipt this Period

1359.91

* In-Kind: Salary

SUBTOTAL of Receipts This Page (optional)

3600.26

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 76 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785879

Amount of Each Receipt this Period

11694.11

* In-Kind: Payroll Taxes

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C

C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4785880

Amount of Each Receipt this Period

11572.33

* In-Kind: Benefits

SUBTOTAL of Receipts This Page (optional)

23266.44

TOTAL This Period (last page this line number only)

71681.34

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 232

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

AAJ PAC

Mailing Address 777 6th St NW

City

Washington

State

DC

Zip Code

20001-3723

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

C00024521

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Transaction ID: C4772734

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

American Federation of State County & Municipal Em

Mailing Address 1625 L St NW

City

Washington

State

DC

Zip Code

20036-5665

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

C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	0

Transaction ID: C4726046

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

I.B.E.W. Educational Committee

Mailing Address 1125 15th St NW

City

Washington

State

DC

Zip Code

20005-2721

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

C00162818

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	0

Transaction ID: C4730169

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

15000.00

C. Form/Schedule : **SA11C**
Transaction ID : **C4730169**

Committee is in receipt of check number 20922 on 8/12/2010 from I.B.E.W Educational Committee. The check is dated 7/23/2010 and was written out of their account ending in 1673.

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

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

FOR LINE NUMBER: PAGE 79 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295933.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 1 0

Transaction ID: C4734422

Amount of Each Receipt this Period

4042.00

B.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295933.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 8 / 2 0 1 0

Transaction ID: C4734593

Amount of Each Receipt this Period

48032.00

C.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295933.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: C4779863

Amount of Each Receipt this Period

10229.00

SUBTOTAL of Receipts This Page (optional)

62303.00

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 80 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295933.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 1 0

Transaction ID: C4779864

Amount of Each Receipt this Period

67138.00

B.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295933.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: C4779865

Amount of Each Receipt this Period

2650.00

C.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing
federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 1 0

Transaction ID: C4726152

Amount of Each Receipt this Period

4924.00

SUBTOTAL of Receipts This Page (optional)

74712.00

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 81 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)
Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121965.71

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4770470

Amount of Each Receipt this Period

200000.00

B.

Full Name (Last, First, Middle Initial)
KENDRICK MEEK CAMPAIGN FOR CONGRESS

Mailing Address 1 SE 3RD AVENUE
SUITE 2100

City State Zip Code
MIAMI FL 33131

FEC ID number of contributing federal political committee. **C** C00379727

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: C4729413

Amount of Each Receipt this Period

350.00

C.

Full Name (Last, First, Middle Initial)
Ted Deutch For Congress Committee

Mailing Address 20423 State Road 7
Ste F6-383

City State Zip Code
Boca Raton FL 33498-6797

FEC ID number of contributing federal political committee. **C** C00469163

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: C4729406

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

202850.00

TOTAL This Period (last page this line number only)

339865.00

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

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

FOR LINE NUMBER: PAGE 82 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

USPS Business Mail Entry Unit

Mailing Address PO Box 163506

City

West Palm Beach

State

FL

Zip Code

33416-3506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

395.90

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 1 0

Transaction ID: C4731069

Amount of Each Receipt this Period

395.90

SUBTOTAL of Receipts This Page (optional)

395.90

TOTAL This Period (last page this line number only)

395.90

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

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

FOR LINE NUMBER: PAGE 83 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City

Old Bridge

State

NJ

Zip Code

08857-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Garcia for Congress

Occupation

Campaign Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1680.16

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: C4723578

Amount of Each Receipt this Period

890.08

SUBTOTAL of Receipts This Page (optional)

890.08

TOTAL This Period (last page this line number only)

890.08

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

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

FOR LINE NUMBER: PAGE 84 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City

Tallahassee

State

FL

Zip Code

32302-1630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4786249

Amount of Each Receipt this Period

64.96

B.

Full Name (Last, First, Middle Initial)

IUPAT

Mailing Address 7234 Parkway Dr

City

Hanover

State

MD

Zip Code

21076-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Transaction ID: C4771089

Amount of Each Receipt this Period

15000.00

C.

Full Name (Last, First, Middle Initial)

Stephen Malove

Mailing Address 14 Rose Dr

City

Fort Lauderdale

State

FL

Zip Code

33316-1012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stephen L. Malove & Assoc-
iates, P.A.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C4778177

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

20064.96

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 85 / 232

(check only one)

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

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City

Old Bridge

State

NJ

Zip Code

08857-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Garcia for Congress

Occupation

Campaign Staff

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1680.16

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 1 0

Transaction ID: C6626239

Amount of Each Receipt this Period

790.08

SUBTOTAL of Receipts This Page (optional)

790.08

TOTAL This Period (last page this line number only)

20855.04

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)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Amazon.Com	Transaction ID: D313493 Date of Disbursement
Mailing Address 1200 12th Ave S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 1 0</div> </div>
City State Zip Code Seattle WA 98144-2712	Amount of Each Disbursement this Period
Purpose of Disbursement Admin Office Supplies Candidate Name	<div> <div>2208.54</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Express Merchant Services	Transaction ID: D315710 Date of Disbursement
Mailing Address PO Box 53852	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 2 / 2 0 1 0</div> </div>
City State Zip Code Phoenix AZ 85072-3852	Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Bank Fee Candidate Name	<div> <div>104.33</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) B&K Solutions	Transaction ID: D313586 Date of Disbursement
Mailing Address 5764 N Orange Blossom Trl	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 1 0</div> </div>
City State Zip Code Orlando FL 32810-1023	Amount of Each Disbursement this Period
Purpose of Disbursement Admin Lease/Rent Candidate Name	<div> <div>650.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2962.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Best Buy Corporate	Transaction ID: D315003 Date of Disbursement																				
Mailing Address 7601 Penn Ave S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	1	0												
City Minneapolis State MN Zip Code 55423-3645 Purpose of Disbursement Admin Office Supplies Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>95.84</td> </tr> </table>	95.84																			
95.84																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Best Buy Corporate	Transaction ID: D313918 Date of Disbursement																				
Mailing Address 7601 Penn Ave S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	1		2	0	1	0												
City Minneapolis State MN Zip Code 55423-3645 Purpose of Disbursement Admin Office Supplies Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>95.84</td> </tr> </table>	95.84																			
95.84																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) Brighthouse Networks	Transaction ID: D320089 Date of Disbursement																				
Mailing Address PO Box 31337 10305 NW 41st St., Ste 201	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Tampa State FL Zip Code 33631-3337 Purpose of Disbursement Admin Internet Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>128.40</td> </tr> </table>	128.40																			
128.40																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

320.08

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Brilliant Corners

Mailing Address 1001 G St NW
Ste 500E

City Washington State DC Zip Code 20001-4541

Purpose of Disbursement

Telephone Calls

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D314982

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

48500.00

B.

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address PO Box 1630

City Tallahassee State FL Zip Code 32302-1630

Purpose of Disbursement

Merchant Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D324665

Date of Disbursement

08 / 18 / 2010

Amount of Each Disbursement this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Capital City Democratic Women's Club

Mailing Address PO Box 146

City Tallahassee State FL Zip Code 32302-0146

Purpose of Disbursement

Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D313352

Date of Disbursement

08 / 03 / 2010

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

48950.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 89 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Celltronix

Mailing Address 1718 S Orange Blossom Trl

City Apopka State FL Zip Code 32703-7745

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D313494

Date of Disbursement

08 / 05 / 2010

Amount of Each Disbursement this Period

354.45

B.

Full Name (Last, First, Middle Initial)

City of Oviedo

Mailing Address 400 Alexandria Blvd

City Oviedo State FL Zip Code 32765-5514

Purpose of Disbursement
Admin Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D313721

Date of Disbursement

08 / 06 / 2010

Amount of Each Disbursement this Period

60.00

C.

Full Name (Last, First, Middle Initial)

City of Oviedo

Mailing Address 400 Alexandria Blvd

City Oviedo State FL Zip Code 32765-5514

Purpose of Disbursement
Admin Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321932

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

14.00

SUBTOTAL of Disbursements This Page (optional)

428.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 90 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Comcast Mailing Address PO Box 105184	Transaction ID: D321931 Date of Disbursement <div> <div>08</div> <div>26</div> <div>2010</div> </div>
City Atlanta State GA Zip Code 30348-5184 Purpose of Disbursement Admin Internet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>298.60</div>
B. Full Name (Last, First, Middle Initial) James Cornille Mailing Address 1301 S Flagler Dr City West Palm Beach State FL Zip Code 33401-6719 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D321707 Date of Disbursement <div> <div>08</div> <div>30</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>203.17</div>
C. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation Mailing Address 430 S Capitol St SE City Washington State DC Zip Code 20003-4024 Purpose of Disbursement Voter File Access Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D324075 Date of Disbursement <div> <div>08</div> <div>20</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>3220.00</div> <p>* In-Kind Received</p>

SUBTOTAL of Disbursements This Page (optional)

3721.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 91 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324076

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

2881.50

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324077

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

6249.00

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324078

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

2140.00

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

11270.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324079

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

269.66

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324080

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

165.47

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324081

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1341.59

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

1776.72

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 93 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324082 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1650.68</td> </tr> </table>	1650.68																			
1650.68																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

B. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324083 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">2040.93</td> </tr> </table>	2040.93																			
2040.93																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

C. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324084 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">2040.93</td> </tr> </table>	2040.93																			
2040.93																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

SUBTOTAL of Disbursements This Page (optional)

5732.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 94 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324085 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1197.90</td> </tr> </table>	1197.90																			
1197.90																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

B. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324086 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1197.91</td> </tr> </table>	1197.91																			
1197.91																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

C. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324087 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1258.96</td> </tr> </table>	1258.96																			
1258.96																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

SUBTOTAL of Disbursements This Page (optional)

3654.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 95 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324088

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

1370.49

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324089

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1236.15

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324090

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1490.92

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

4097.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 96 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324091

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1419.68

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324092

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

2129.47

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324093

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1605.67

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

5154.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 97 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324094 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1605.68</td> </tr> </table>	1605.68																			
1605.68																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
* In-Kind Received																					
B. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324095 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">649.93</td> </tr> </table>	649.93																			
649.93																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
* In-Kind Received																					
C. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324096 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1229.99</td> </tr> </table>	1229.99																			
1229.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
* In-Kind Received																					

SUBTOTAL of Disbursements This Page (optional)

3485.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 98 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324097

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1334.40

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324098

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

1344.39

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324099

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

1147.28

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

3826.07

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324100 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1584.74</td> </tr> </table>	1584.74																			
1584.74																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

B. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324101 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1236.15</td> </tr> </table>	1236.15																			
1236.15																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

C. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324102 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">655.61</td> </tr> </table>	655.61																			
655.61																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

SUBTOTAL of Disbursements This Page (optional)

3476.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324103 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1359.91</td> </tr> </table>	1359.91																			
1359.91																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

B. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324104 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1359.91</td> </tr> </table>	1359.91																			
1359.91																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

C. Full Name (Last, First, Middle Initial) Democratic National Committee Services Corporation	Transaction ID: D324105 Date of Disbursement																				
Mailing Address 430 S Capitol St SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Washington State DC Zip Code 20003-4024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes	<table border="1"> <tr> <td colspan="10">11694.11</td> </tr> </table>	11694.11																			
11694.11																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ * In-Kind Received																				

SUBTOTAL of Disbursements This Page (optional)

14413.93

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee Services Corporation

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
Benefits

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D324106

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

11572.33

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)

DNC Travel Offset Account

Mailing Address 430 S Capitol St SE

City
Washington

State
DC

Zip Code
20003-4024

Purpose of Disbursement
POTUS Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315587

Date of Disbursement

08 / 19 / 2010

Amount of Each Disbursement this Period

44344.08

C.

Full Name (Last, First, Middle Initial)

Elavon Merchant Services

Mailing Address 1 Concourse Pkwy NE
Ste 300

City
Atlanta

State
GA

Zip Code
30328-5346

Purpose of Disbursement
Merchant Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315708

Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

453.27

SUBTOTAL of Disbursements This Page (optional)

56369.68

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Elavon Merchant Services

Mailing Address 1 Concourse Pkwy NE
Ste 300

City Atlanta State GA Zip Code 30328-5346

Purpose of Disbursement
Merchant Bank Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315709

Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

62.77

B.

Full Name (Last, First, Middle Initial)

Everest National Insurance Company

Mailing Address PO Box 917807

City Orlando State FL Zip Code 32891-7807

Purpose of Disbursement
Benefits

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D313474

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

21.01

C.

Full Name (Last, First, Middle Initial)

Everest National Insurance Company

Mailing Address PO Box 917807

City Orlando State FL Zip Code 32891-7807

Purpose of Disbursement
Benefits

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D313475

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

224.54

SUBTOTAL of Disbursements This Page (optional)

308.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Florida Democratic Party	Transaction ID: D436894 Date of Disbursement																				
Mailing Address 214 S Bronough St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Tallahassee State FL Zip Code 32301-1705	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">100000.00</td> </tr> </table>	100000.00																			
100000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Florida State Fairgrounds	Transaction ID: D324653 Date of Disbursement																				
Mailing Address 4800 N US Highway 301	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	4		2	0	1	0												
City Tampa State FL Zip Code 33610-7350	Amount of Each Disbursement this Period																				
Purpose of Disbursement Site Rental Candidate Name	<table border="1"> <tr> <td colspan="10">2778.56</td> </tr> </table>	2778.56																			
2778.56																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Fontainebleau Resort	Transaction ID: D313351 Date of Disbursement																				
Mailing Address 4441 Collins Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	1	0												
City Miami Beach State FL Zip Code 33140-3227	Amount of Each Disbursement this Period																				
Purpose of Disbursement Site Rental Candidate Name	<table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table>	10000.00																			
10000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

112778.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Holiday Inn

Mailing Address 3535 Ulmerton Rd

City
Clearwater

State
FL

Zip Code
33762-4212

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315753

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

424.08

B.

Full Name (Last, First, Middle Initial)

Investments Limited

Mailing Address 215 N Federal Hwy
Ste 1

City
Boca Raton

State
FL

Zip Code
33432-3928

Purpose of Disbursement
Admin Lease/ Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321929

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

2023.50

C.

Full Name (Last, First, Middle Initial)

Kester Brothers Reality

Mailing Address 615 E Atlantic Blvd

City
Pompano Beach

State
FL

Zip Code
33060-6343

Purpose of Disbursement
Admin Lease/ Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321930

Date of Disbursement

08 / 25 / 2010

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)

4847.58

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mission Control</p> <p>Mailing Address 114 Mansfield Hollow Rd # A</p> <p>City Mansfield Center State CT Zip Code 06250-1316</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D315577</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 23321.70</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mission Control</p> <p>Mailing Address 114 Mansfield Hollow Rd # A</p> <p>City Mansfield Center State CT Zip Code 06250-1316</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D314410</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 56949.75</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Payroll Matters</p> <p>Mailing Address 2069 N Monroe St</p> <p>City Tallahassee State FL Zip Code 32303-4727</p> <p>Purpose of Disbursement Payroll Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D315224</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 66.25</p>

SUBTOTAL of Disbursements This Page (optional)

80337.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D315227 Date of Disbursement																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Tax Candidate Name	<table border="1"> <tr> <td colspan="10">8843.75</td> </tr> </table>	8843.75																			
8843.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D315256 Date of Disbursement																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Tax Candidate Name	<table border="1"> <tr> <td colspan="10">3944.11</td> </tr> </table>	3944.11																			
3944.11																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D322511 Date of Disbursement																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Tallahassee State FL Zip Code 32303-4727	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Tax Candidate Name	<table border="1"> <tr> <td colspan="10">9245.48</td> </tr> </table>	9245.48																			
9245.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

22033.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D322512 Date of Disbursement																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Tallahassee State FL Zip Code 32303-4727 Purpose of Disbursement Payroll Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8</td><td>2</td><td>.</td><td>5</td><td>0</td> </tr> </table>	8	2	.	5	0															
8	2	.	5	0																	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Payroll Matters	Transaction ID: D322532 Date of Disbursement																				
Mailing Address 2069 N Monroe St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Tallahassee State FL Zip Code 32303-4727 Purpose of Disbursement Payroll Tax Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8</td><td>0</td><td>5</td><td>8</td><td>.</td><td>5</td><td>0</td> </tr> </table>	8	0	5	8	.	5	0													
8	0	5	8	.	5	0															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) PGA Commons, LLC	Transaction ID: D314782 Date of Disbursement																				
Mailing Address 5520 Pga Blvd PGA PRCL 1 Retail Bldg 1	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Palm Beach Gardens State FL Zip Code 33418-3981 Purpose of Disbursement Admin Lease/Rent Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>4</td><td>2</td><td>4</td><td>.</td><td>2</td><td>1</td> </tr> </table>	1	4	2	4	.	2	1													
1	4	2	4	.	2	1															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

9565.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Progress Energy Florida

Mailing Address PO Box 33199

City
Saint Petersburg

State
FL

Zip Code
33733-8199

Purpose of Disbursement

Admin Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D314831

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

355.00

B.

Full Name (Last, First, Middle Initial)

Progress Energy Florida

Mailing Address PO Box 33199

City
Saint Petersburg

State
FL

Zip Code
33733-8199

Purpose of Disbursement

Admin Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D320090

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

85.83

C.

Full Name (Last, First, Middle Initial)

Royal Performance Group

Mailing Address 2100 Western Ave
Ste 80

City
Lisle

State
IL

Zip Code
60532-1971

Purpose of Disbursement

Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321860

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

24.50

SUBTOTAL of Disbursements This Page (optional)

465.33

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Marian Sanders

Mailing Address 3755 Dairy Rd

City
TitusvilleState
FLZip Code
32796-4210Purpose of Disbursement
Admin Lease/Rent

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D313585

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	1	0

Amount of Each Disbursement this Period

745.64

B.

Full Name (Last, First, Middle Initial)

Union Printing

Mailing Address 2321 Pembroke Rd

City
HollywoodState
FLZip Code
33020-6253Purpose of Disbursement
Printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321906

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	0

Amount of Each Disbursement this Period

169.60

C.

Full Name (Last, First, Middle Initial)

United Way World Wide

Mailing Address 701 N Fairfax St
Attn: Haiti Relief FundCity
AlexandriaState
VAZip Code
22314-2058Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D313570

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	0

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1165.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) WRI-TC	Transaction ID: D313589 Date of Disbursement
Mailing Address 2720 E Colonial Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32803-5025	Amount of Each Disbursement this Period
Purpose of Disbursement Admin Lease/Rent Candidate Name	<div> <div>1016.22</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D313587 Date of Disbursement
Mailing Address 5760 Braveheart Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32317-9409	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Reimbursement Candidate Name	<div> <div>247.35</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D313588 Date of Disbursement
Mailing Address 5760 Braveheart Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32317-9409	Amount of Each Disbursement this Period
Purpose of Disbursement Auto Travel Candidate Name	<div> <div>247.35</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1263.57

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Maria Quezada

Mailing Address 322 E Mayfield Blvd

City
San Antonio

State
TX

Zip Code
78214-2448

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D314947

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

247.09

B.

Full Name (Last, First, Middle Initial)

AT&T

Mailing Address PO Box 105262

City
Atlanta

State
GA

Zip Code
30348-5262

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D314950

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D314951

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

147.09

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

247.09

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Matthew Coppins</p> <p>Mailing Address 2830 4th St NW Apt 5</p> <p>City Naples State FL Zip Code 34120-1394</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D314953</p> <p>Date of Disbursement 08 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 230.79</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) RaceTrac Petroleum Incorporated</p> <p>Mailing Address 3535 W Silver Springs Blvd</p> <p>City Ocala State FL Zip Code 34475-5641</p> <p>Purpose of Disbursement Auto Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D314954</p> <p>Date of Disbursement 08 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 230.79</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kevin Chambliss</p> <p>Mailing Address 746 N Annie Glidden Rd Apt 404</p> <p>City Dekalb State IL Zip Code 60115-2130</p> <p>Purpose of Disbursement Staff Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D314955</p> <p>Date of Disbursement 08 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 212.09</p>

SUBTOTAL of Disbursements This Page (optional)

442.88

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Chevron One Stop	Transaction ID: D314957 Date of Disbursement																				
Mailing Address 300 N. Washington	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Sarasota State FL Zip Code 34236	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">112.09</td> </tr> </table>	112.09																			
112.09																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Virgin Mobile	Transaction ID: D314956 Date of Disbursement																				
Mailing Address 100 E Magnolia Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Tallahassee State FL Zip Code 32301-5567	Amount of Each Disbursement this Period																				
Purpose of Disbursement Admin Cell Phone Candidate Name	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Hector Martinez	Transaction ID: D314958 Date of Disbursement																				
Mailing Address 11100 SW 46th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Miami State FL Zip Code 33165-4735	Amount of Each Disbursement this Period																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">219.54</td> </tr> </table>	219.54																			
219.54																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																					

SUBTOTAL of Disbursements This Page (optional)

219.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 114 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D314959 Date of Disbursement
Mailing Address PO Box 105262	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 1 0</div> </div>
City Atlanta State GA Zip Code 30348-5262	Amount of Each Disbursement this Period
Purpose of Disbursement Admin Cell Phone Candidate Name	<div> <div>100.00</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Chevron One Stop	Transaction ID: D314960 Date of Disbursement
Mailing Address 300 N. Washington	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 1 0</div> </div>
City Sarasota State FL Zip Code 34236	Amount of Each Disbursement this Period
Purpose of Disbursement Auto Travel Candidate Name	<div> <div>119.54</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Tarin Nix	Transaction ID: D314963 Date of Disbursement
Mailing Address 2704 French Pl Apt G	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 1 0</div> </div>
City Austin State TX Zip Code 78722-2330	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Reimbursement Candidate Name	<div> <div>372.70</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

372.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

AT&T

Mailing Address PO Box 105262

City
Atlanta

State
GA

Zip Code
30348-5262

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D314964

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D314965

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

272.70

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Gaston Araoz

Mailing Address 1505 Crystal Dr
Apt 504

City
Arlington

State
VA

Zip Code
22202-4117

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D314966

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

81.02

SUBTOTAL of Disbursements This Page (optional)

81.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Exxon Mobile	Transaction ID: D314967 Date of Disbursement																				
Mailing Address 5959 Las Colinas Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Irving State TX Zip Code 75039-4202	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">47.01</td> </tr> </table>	47.01																			
47.01																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Sprint Nextel Corporation	Transaction ID: D314968 Date of Disbursement																				
Mailing Address PO Box 63670 Ste 2200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Phoenix State AZ Zip Code 85082-3670	Amount of Each Disbursement this Period																				
Purpose of Disbursement Admin Cell Phone Candidate Name	<table border="1"> <tr> <td colspan="10">34.01</td> </tr> </table>	34.01																			
34.01																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Michael Gray	Transaction ID: D314976 Date of Disbursement																				
Mailing Address 920 E 3rd Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	1	0												
City New Smyrna Beach State FL Zip Code 32169-3147	Amount of Each Disbursement this Period																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">100.22</td> </tr> </table>	100.22																			
100.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																					

SUBTOTAL of Disbursements This Page (optional)

100.22

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Michael Gray Mailing Address 920 E 3rd Ave	Transaction ID: D314977 Date of Disbursement <div> <div>08</div> <div>12</div> <div>2010</div> </div>
City New Smyrna Beach State FL Zip Code 32169-3147 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>100.22</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Ashley Ball Mailing Address 822 E 15th Ave City New Smyrna Beach State FL Zip Code 32169-3404 Purpose of Disbursement Staff Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314978 Date of Disbursement <div> <div>08</div> <div>12</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>333.60</div>
C. Full Name (Last, First, Middle Initial) Ashley Ball Mailing Address 822 E 15th Ave City New Smyrna Beach State FL Zip Code 32169-3404 Purpose of Disbursement Auto Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D314979 Date of Disbursement <div> <div>08</div> <div>12</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>333.60</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

333.60

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

William Sanchez

Mailing Address 698 NW 134th PI

City
Miami

State
FL

Zip Code
33182-1668

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315005

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

190.18

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315006

Date of Disbursement

08 / 13 / 2010

Amount of Each Disbursement this Period

90.18

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sprint

Mailing Address 6450 Sprint Pkwy

City
Overland Park

State
KS

Zip Code
66251-6105

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315007

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

190.18

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Emily McIlveene	Transaction ID: D315009 Date of Disbursement
Mailing Address 148 Meadow Brook Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 1 0</div> </div>
City State Zip Code Rock Spring GA 30739-2341	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Reimbursement	<div>184.80</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Kendale S/C	Transaction ID: D315014 Date of Disbursement
Mailing Address 11370 Miller Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 1 0</div> </div>
City State Zip Code Miami FL 33175	Amount of Each Disbursement this Period
Purpose of Disbursement Auto Travel	<div>84.80</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D315016 Date of Disbursement
Mailing Address PO Box 660108	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 9 / 2 0 1 0</div> </div>
City State Zip Code Dallas TX 75266-0108	Amount of Each Disbursement this Period
Purpose of Disbursement Admin Cell Phone	<div>100.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

184.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Matthew Coppins</p> <hr/> <p>Mailing Address 2830 4th St NW Apt 5</p> <hr/> <p>City Naples State FL Zip Code 34120-1394</p> <hr/> <p>Purpose of Disbursement Staff Reimbursement</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D315018</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="82.55"/></p> <hr/> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mobil Gas</p> <hr/> <p>Mailing Address 4705 W Lake Mary Blvd</p> <hr/> <p>City Lake Mary State FL Zip Code 32746-4305</p> <hr/> <p>Purpose of Disbursement Auto Travel</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D315020</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.05"/></p> <hr/> <p>Category/ Type</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sunpass</p> <hr/> <p>Mailing Address 605 Suwannee St</p> <hr/> <p>City Tallahassee State FL Zip Code 32399-3601</p> <hr/> <p>Purpose of Disbursement Auto Travel</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D315021</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <hr/> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2.50"/></p> <hr/> <p>Category/ Type</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

82.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lucas P Barks

Mailing Address 71 Gray Rd

City
Gorham

State
ME

Zip Code
04038-1110

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315022

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

191.33

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315023

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

136.83

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sunpass

Mailing Address 605 Suwannee St

City
Tallahassee

State
FL

Zip Code
32399-3601

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315024

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

54.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

191.33

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 122 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City
Old Bridge

State
NJ

Zip Code
08857-3062

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315026

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

81.52

B.

Full Name (Last, First, Middle Initial)

Citgo - Corporate

Mailing Address 1293 Eldridge Pkwy

City
Houston

State
TX

Zip Code
77077-1670

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315030

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

61.52

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sunpass

Mailing Address 605 Suwannee St

City
Tallahassee

State
FL

Zip Code
32399-3601

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315028

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

81.52

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Andrea D Huerfano	Transaction ID: D315056 Date of Disbursement																				
Mailing Address 2949 Riverside Dr Apt 227	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	1	0												
City Coral Springs State FL Zip Code 33065-1017	Amount of Each Disbursement this Period																				
Purpose of Disbursement Staff Reimbursement Candidate Name	<table border="1"> <tr> <td colspan="10">228.66</td> </tr> </table>	228.66																			
228.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Chevron	Transaction ID: D315057 Date of Disbursement																				
Mailing Address 501 El Camino Real	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	1	0												
City Millbrae State CA Zip Code 94030-2030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">192.16</td> </tr> </table>	192.16																			
192.16																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sunpass	Transaction ID: D315058 Date of Disbursement																				
Mailing Address 605 Suwannee St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	1	0												
City Tallahassee State FL Zip Code 32399-3601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">36.50</td> </tr> </table>	36.50																			
36.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

228.66

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Royal Performance Group

Mailing Address 2100 Western Ave
Ste 80

City Lisle State IL Zip Code 60532-1971

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321859

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

4075.00

B.

Full Name (Last, First, Middle Initial)

Alan Awad

Mailing Address 13612 Avalon Heights Blvd
Apt 204B

City Tampa State FL Zip Code 33613-4676

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D364340

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Steven Balog

Mailing Address 13413 Thomasville Cir

City Tampa State FL Zip Code 33617-9344

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D364342

Date of Disbursement

09 / 20 / 2010

Amount of Each Disbursement this Period

190.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4075.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

James Cornille

Mailing Address 1301 S Flagler Dr

City State Zip Code
West Palm Beach FL 33401-6719

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364316

Date of Disbursement

09 / 02 / 2010

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Clifford Davy

Mailing Address 5055 Wellington Park Cir
Apt C18

City State Zip Code
Orlando FL 32839-4591

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364334

Date of Disbursement

09 / 22 / 2010

Amount of Each Disbursement this Period

195.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Nicholas Denmon

Mailing Address 8300 41st Ave N

City State Zip Code
Saint Petersburg FL 33709-3943

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364325

Date of Disbursement

09 / 22 / 2010

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Nicholas Denmon

Mailing Address 8300 41st Ave N

City
Saint Petersburg

State
FL

Zip Code
33709-3943

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364326

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Erin Jensen

Mailing Address 517 Belle Isle Ave

City
Belleair Beach

State
FL

Zip Code
33786-3611

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364313

Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

310.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Anthony Nagatani

Mailing Address 1300 Elizabeth Ave
Apt 15

City
Las Vegas

State
NV

Zip Code
89119-6449

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364332

Date of Disbursement

09 / 22 / 2010

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 127 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Brenadette Ohran

Mailing Address 155 55th Ave NE

City
Saint Petersburg

State
FL

Zip Code
33703-3011

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364314

Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

215.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Brenadette Ohran

Mailing Address 155 55th Ave NE

City
Saint Petersburg

State
FL

Zip Code
33703-3011

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364315

Date of Disbursement

09 / 29 / 2010

Amount of Each Disbursement this Period

285.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Edith Robles

Mailing Address 305 Bullard St

City
Fairfield

State
CT

Zip Code
06825-3719

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364329

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

195.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.	Full Name (Last, First, Middle Initial) Edith Robles	Transaction ID: D364330 Date of Disbursement 09 / 15 / 2010
	Mailing Address 305 Bullard St	
	City Fairfield State CT Zip Code 06825-3719	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Auto Travel	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Joshua Romero	Transaction ID: D364338 Date of Disbursement 09 / 22 / 2010
	Mailing Address 14332 Tambourine Dr	
	City Orlando State FL Zip Code 32837-7038	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Auto Travel	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Jean Roseme	Transaction ID: D364339 Date of Disbursement 09 / 22 / 2010
	Mailing Address 101 NE 31st St	
	City Pompano Beach State FL Zip Code 33064-3645	Amount of Each Disbursement this Period 180.00
	Purpose of Disbursement Auto Travel	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)	0.00
	TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Gabriel Sebag

Mailing Address 635 Stillview Cir

City
BrandonState
FLZip Code
33510-2124

Purpose of Disbursement

Auto Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D364328

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Vito D Sheeley

Mailing Address 2111 Almeria Way S

City

Saint Petersburg

State
FLZip Code
33712-4418

Purpose of Disbursement

Auto Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D364331

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Jacob Smith

Mailing Address 2121 Intracoastal Dr

City

Fort Lauderdale

State
FLZip Code
33305-3637

Purpose of Disbursement

Auto Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D364333

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	0

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Omar Syed

Mailing Address 13538 Lake Magdalene Dr

City
Tampa

State
FL

Zip Code
33613-4130

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D332975

Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Adam Unger

Mailing Address 2309 Old Bainbridge Rd
 # 101 C

City
Tallahassee

State
FL

Zip Code
32303-3805

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364337

Date of Disbursement

09 / 22 / 2010

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

James Wheeler

Mailing Address 2418 Teresa Cir
 Apt D

City
Tampa

State
FL

Zip Code
33629-6148

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364335

Date of Disbursement

09 / 22 / 2010

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

James Wheeler

Mailing Address 2418 Teresa Cir
Apt D

City Tampa State FL Zip Code 33629-6148

Purpose of Disbursement

Auto Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D364336

Date of Disbursement

M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 1 0

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Christopher Lazo

Mailing Address 1951 N Meridian Rd
Apt 28

City Tallahassee State FL Zip Code 32303-5249

Purpose of Disbursement

Staff Reimbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321892

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Amount of Each Disbursement this Period

197.84

C.

Full Name (Last, First, Middle Initial)

Christopher Lazo

Mailing Address 1951 N Meridian Rd
Apt 28

City Tallahassee State FL Zip Code 32303-5249

Purpose of Disbursement

Auto Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321895

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 3 0 / 2 0 1 0

Amount of Each Disbursement this Period

188.16

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

197.84

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Subway - Corporate

Mailing Address 325 Bic Dr

City
Milford

State
CT

Zip Code
06461-3072

Purpose of Disbursement
Lunch Meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321899

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

9.68

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ms. Christina Boltin

Mailing Address 2413 Bayshore Blvd

City
Tampa

State
FL

Zip Code
33629-7333

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321911

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

312.84

C.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address PO Box 250550
MD 755

City
Tulsa

State
OK

Zip Code
74158

Purpose of Disbursement
Air Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321917

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

312.84

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Continental Airlines

Mailing Address PO Box 4607

City
Houston

State
TX

Zip Code
77210-4607

Purpose of Disbursement

Air Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321918

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Fontainebleau Resort

Mailing Address 4441 Collins Ave

City
Miami Beach

State
FL

Zip Code
33140-3227

Purpose of Disbursement

Travel/Lodging

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321915

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

225.15

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

iTunes Store

Mailing Address 1 Infinite Loop

City
Cupertino

State
CA

Zip Code
95014-2083

Purpose of Disbursement

Admin Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321919

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

12.69

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Tampa International Airport

Mailing Address PO Box 22287

City
Tampa

State
FL

Zip Code
33622-2287

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321916

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Michael Gray

Mailing Address 920 E 3rd Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3147

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321922

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

136.50

C.

Full Name (Last, First, Middle Initial)

Michael Gray

Mailing Address 920 E 3rd Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3147

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321923

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

136.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

136.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D321924 Date of Disbursement
Mailing Address 5760 Braveheart Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32317-9409	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Reimbursement Candidate Name	<div> <div>130.56</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D321925 Date of Disbursement
Mailing Address 5760 Braveheart Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 6 / 2 0 1 0</div> </div>
City Tallahassee State FL Zip Code 32317-9409	Amount of Each Disbursement this Period
Purpose of Disbursement Auto Travel Candidate Name	<div> <div>130.56</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ogden Frank Clark	Transaction ID: D321927 Date of Disbursement
Mailing Address 3100 NE 49th St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 1 0</div> </div>
City Fort Lauderdale State FL Zip Code 33308-4902	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Reimbursement Candidate Name	<div> <div>260.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

390.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Blue Cross and Blue Shield of Florida

Mailing Address PO Box 2210

City Jacksonville State FL Zip Code 32203-2210

Purpose of Disbursement
Benefits

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321928

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

260.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Pamela Rivera

Mailing Address 232 Afton Sq
Unit 212

City Altamonte Springs State FL Zip Code 32714-3848

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321933

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

190.08

C. Full Name (Last, First, Middle Initial)
Pamela Rivera

Mailing Address 232 Afton Sq
Unit 212

City Altamonte Springs State FL Zip Code 32714-3848

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321934

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

70.08

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

190.08

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

T-Mobile

Mailing Address PO Box 742596

City
Cincinnati

State
OH

Zip Code
45274-2596

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321936

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

120.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ashley Ball

Mailing Address 822 E 15th Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3404

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321937

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

531.08

C.

Full Name (Last, First, Middle Initial)

Ashley Ball

Mailing Address 822 E 15th Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3404

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321940

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

392.28

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

531.08

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

[MEMO ITEM]

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

RaceTrac Petroleum Incorporated

Mailing Address 3535 W Silver Springs Blvd

City
Ocala

State
FL

Zip Code
34475-5641

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321965

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

14.55

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Timeshare Sales Today

Mailing Address 7901 4th St N
Ste 311

City
Saint Petersburg

State
FL

Zip Code
33702-4314

Purpose of Disbursement
Admin Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321969

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

UHaul - Corporate

Mailing Address 2727 N Central Ave

City
Phoenix

State
AZ

Zip Code
85004-1155

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321966

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

71.08

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lucas P Barks

Mailing Address 71 Gray Rd

City
Gorham

State
ME

Zip Code
04038-1110

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322254

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

103.75

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322256

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

103.75

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Emily Mcilveene

Mailing Address 148 Meadow Brook Dr

City
Rock Spring

State
GA

Zip Code
30739-2341

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322257

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

157.89

SUBTOTAL of Disbursements This Page (optional)

261.64

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Amoco Oil

Mailing Address PO Box 43013

c/o JPMorgan Chase Bank

City
Providence

State
RI

Zip Code
02940-3013

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322260

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

78.95

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322259

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

78.94

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Kevin Chambliss

Mailing Address 746 N Annie Glidden Rd
Apt 404

City
DeKalb

State
IL

Zip Code
60115-2130

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322261

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

263.12

SUBTOTAL of Disbursements This Page (optional)

263.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Chevron One Stop

Mailing Address 300 N. Washington

City State Zip Code
Sarasota FL 34236

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322266

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

95.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City State Zip Code
Houston TX 77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322269

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

96.95

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Subway - Corporate

Mailing Address 325 Bic Dr

City State Zip Code
Milford CT 06461-3072

Purpose of Disbursement
Lunch Meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322262

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

71.17

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

John Estes

Mailing Address 9884 SW 26th Ter

City
Miami

State
FL

Zip Code
33165-2627

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322270

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

197.49

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322275

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

137.49

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sprint Nextel Corporation

Mailing Address PO Box 63670
Ste 2200

City
Phoenix

State
AZ

Zip Code
85082-3670

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322273

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

197.49

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Maria Quezada

Mailing Address 322 E Mayfield Blvd

City San Antonio State TX Zip Code 78214-2448

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322277

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

104.75

B.

Full Name (Last, First, Middle Initial)

BP American Headquarters

Mailing Address 501 Westlake Park Blvd

City Houston State TX Zip Code 77079-2604

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322279

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

89.76

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sunpass

Mailing Address 605 Suwannee St

City Tallahassee State FL Zip Code 32399-3601

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322278

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

14.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

104.75

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Gaston Araoz

Mailing Address 1505 Crystal Dr
Apt 504

City Arlington State VA Zip Code 22202-4117

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322280

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

61.19

B.

Full Name (Last, First, Middle Initial)

Florida's Turnpike

Mailing Address Turnpike Mile Post 263
Bldg. 5315

City Ocoee State FL Zip Code 34761

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322282

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

12.02

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Publix Super Markets, Inc.

Mailing Address P.O. 32009
PO Box 407

City Lakeland State FL Zip Code 33802-0407

Purpose of Disbursement
Lunch Meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322281

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

49.17

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

61.19

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City
Old Bridge

State
NJ

Zip Code
08857-3062

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322283

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

160.72

B.

Full Name (Last, First, Middle Initial)

Little Caesar's Pizza

Mailing Address 1551 SW 107th Ave

City
Miami

State
FL

Zip Code
33174-2510

Purpose of Disbursement
Lunch Meeting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322285

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

34.11

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322284

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

126.61

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

160.72

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Matthew Coppins

Mailing Address 2830 4th St NW
Apt 5

City Naples State FL Zip Code 34120-1394

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322286

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

305.53

B.

Full Name (Last, First, Middle Initial)

BP American Headquarters

Mailing Address 501 Westlake Park Blvd

City Houston State TX Zip Code 77079-2604

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322288

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

221.91

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

WalMart Stores, Inc.

Mailing Address 702 SW 8th St

City Bentonville State AR Zip Code 72716-6209

Purpose of Disbursement
Admin Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322287

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

83.62

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

305.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Tarin Nix

Mailing Address 2704 French Pl
Apt G

City Austin State TX Zip Code 78722-2330

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322289

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

412.68

B.

Full Name (Last, First, Middle Initial)

Jet Blue

Mailing Address 11829 Queens Blvd

City Forest Hills State NY Zip Code 11375-7212

Purpose of Disbursement
Air Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322291

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

265.40

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Mobil Gas

Mailing Address 4705 W Lake Mary Blvd

City Lake Mary State FL Zip Code 32746-4305

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322292

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

109.28

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

412.68

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sunpass

Mailing Address 605 Suwannee St

City
Tallahassee

State
FL

Zip Code
32399-3601

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322290

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

38.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ricardo Junquera

Mailing Address 10041 SW 48th St

City
Miami

State
FL

Zip Code
33165-6379

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322293

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

356.53

C.

Full Name (Last, First, Middle Initial)

Chevron One Stop

Mailing Address 300 N. Washington

City
Sarasota

State
FL

Zip Code
34236

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322296

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

75.10

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

356.53

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Florida's Turnpike

Mailing Address Turnpike Mile Post 263
Bldg. 5315

City Ocoee State FL Zip Code 34761

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322294

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

5.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322298

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

175.93

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sprint Nextel Corporation

Mailing Address PO Box 63670
Ste 2200

City Phoenix State AZ Zip Code 85082-3670

Purpose of Disbursement
Admin Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322295

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 151 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Hector Martinez

Mailing Address 11100 SW 46th St

City
Miami

State
FL

Zip Code
33165-4735

Purpose of Disbursement
Staff Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322299

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

128.70

B.

Full Name (Last, First, Middle Initial)

BP American Headquarters

Mailing Address 501 Westlake Park Blvd

City
Houston

State
TX

Zip Code
77079-2604

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322301

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

70.16

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Shell Gas - Corporate

Mailing Address PO Box 2463

City
Houston

State
TX

Zip Code
77252-2463

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322300

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

58.54

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

128.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 152 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Andrea D Huerfano</p> <hr/> <p>Mailing Address 2949 Riverside Dr Apt 227</p> <hr/> <p>City Coral Springs State FL Zip Code 33065-1017</p> <hr/> <p>Purpose of Disbursement Staff Reimbursement</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322302</p> <p>Date of Disbursement <div> <div>08</div> <div>30</div> <div>2010</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div>133.73</div> </p> <hr/> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Amoco Oil</p> <hr/> <p>Mailing Address PO Box 43013 c/o JPMorgan Chase Bank</p> <hr/> <p>City Providence State RI Zip Code 02940-3013</p> <hr/> <p>Purpose of Disbursement Auto Travel</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322305</p> <p>Date of Disbursement <div> <div>08</div> <div>30</div> <div>2010</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div>50.36</div> </p> <hr/> <p>Category/ Type</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chevron One Stop</p> <hr/> <p>Mailing Address 300 N. Washington</p> <hr/> <p>City Sarasota State FL Zip Code 34236</p> <hr/> <p>Purpose of Disbursement Auto Travel</p> <hr/> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322306</p> <p>Date of Disbursement <div> <div>08</div> <div>30</div> <div>2010</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period <div>66.42</div> </p> <hr/> <p>Category/ Type</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

133.73

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Lowes	Transaction ID: D322304 Date of Disbursement																				
Mailing Address 1000 Lowes Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Mooresville State NC Zip Code 28117-8520	Amount of Each Disbursement this Period																				
Purpose of Disbursement Admin Office Supplies	<table border="1"> <tr> <td colspan="10">4.70</td> </tr> </table>	4.70																			
4.70																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) Sunpass	Transaction ID: D322303 Date of Disbursement																				
Mailing Address 605 Suwannee St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Tallahassee State FL Zip Code 32399-3601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel	<table border="1"> <tr> <td colspan="10">12.25</td> </tr> </table>	12.25																			
12.25																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) Denise Rodriguez	Transaction ID: D322307 Date of Disbursement																				
Mailing Address 12514 Wandering Brook Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Charlotte State NC Zip Code 28273-6974	Amount of Each Disbursement this Period																				
Purpose of Disbursement Staff Reimbursement	<table border="1"> <tr> <td colspan="10">308.10</td> </tr> </table>	308.10																			
308.10																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

308.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D322309 Date of Disbursement																				
Mailing Address PO Box 105262	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Atlanta State GA Zip Code 30348-5262	Amount of Each Disbursement this Period																				
Purpose of Disbursement Admin Cell Phone Candidate Name	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Citgo - Corporate	Transaction ID: D322310 Date of Disbursement																				
Mailing Address 1293 Eldridge Pkwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Houston State TX Zip Code 77077-1670	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">49.50</td> </tr> </table>	49.50																			
49.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Shell Gas - Corporate	Transaction ID: D322311 Date of Disbursement																				
Mailing Address PO Box 2463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Houston State TX Zip Code 77252-2463	Amount of Each Disbursement this Period																				
Purpose of Disbursement Auto Travel Candidate Name	<table border="1"> <tr> <td colspan="10">155.35</td> </tr> </table>	155.35																			
155.35																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 155 / 232

<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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Sunpass

Mailing Address 605 Suwannee St

City
Tallahassee

State
FL

Zip Code
32399-3601

Purpose of Disbursement
Auto Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322308

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2010

Amount of Each Disbursement this Period

3.25

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

414026.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 156 / 232

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Florida Democratic Party

Mailing Address 214 S Bronough St

City
TallahasseeState
FLZip Code
32301-1705Purpose of Disbursement
Transfer to Non Federal Use

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D436861

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Florida Democratic Party

Mailing Address 214 S Bronough St

City
TallahasseeState
FLZip Code
32301-1705Purpose of Disbursement
Transfer

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D436862

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Amount of Each Disbursement this Period

15000.00

SUBTOTAL of Disbursements This Page (optional)

20000.00

TOTAL This Period (last page this line number only)

20000.00

A. Form/Schedule : **SB29**
Transaction ID : **D436861**

Deposit error - corrected transfer to Non Federal 8/31/2010

B. Form/Schedule : **SB29**
Transaction ID : **D436862**

Deposit error moved to Non Federal 8/31/2010.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 / 232

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Gaston Araoz

Transaction ID: D321716

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address 1505 Crystal Dr
Apt 504City
ArlingtonState
VAZip Code
22202-4117

Amount of Each Disbursement this Period

689.48									
--------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Gaston Araoz

Transaction ID: D315209

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	0

Mailing Address 1505 Crystal Dr
Apt 504City
ArlingtonState
VAZip Code
22202-4117

Amount of Each Disbursement this Period

813.24									
--------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Gabrielle Ann Arcangeli

Transaction ID: D315270

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	0

Mailing Address 155 Whetherbine Way W

City
TallahasseeState
FLZip Code
32301-8538

Amount of Each Disbursement this Period

1360.11									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2862.83

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Gabrielle Ann Arcangeli

Transaction ID: D322916

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address 155 Whetherbine Way W

Amount of Each Disbursement this Period

1360.10									
---------	--	--	--	--	--	--	--	--	--

City	State	Zip Code
Tallahassee	FL	32301-8538

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

B.

Full Name (Last, First, Middle Initial)

Esther Arregui

Transaction ID: D321730

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address 902 Lisbon St

Amount of Each Disbursement this Period

689.48									
--------	--	--	--	--	--	--	--	--	--

City	State	Zip Code
Coral Gables	FL	33134-2240

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

C.

Full Name (Last, First, Middle Initial)

Alan Awad

Transaction ID: D322922

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	0

Mailing Address 13612 Avalon Heights Blvd
Apt 204B

Amount of Each Disbursement this Period

1037.55									
---------	--	--	--	--	--	--	--	--	--

City	State	Zip Code
Tampa	FL	33613-4676

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

SUBTOTAL of Disbursements This Page (optional)

3087.13

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Ashley Ball

Mailing Address 822 E 15th Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3404

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321711

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1802.98

B.

Full Name (Last, First, Middle Initial)

Ashley Ball

Mailing Address 822 E 15th Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3404

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315203

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

1802.98

C.

Full Name (Last, First, Middle Initial)

Steven Balog

Mailing Address 13413 Thomasville Cir

City
Tampa

State
FL

Zip Code
33617-9344

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322923

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1118.33

SUBTOTAL of Disbursements This Page (optional)

4724.29

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Lucas P Barks

Mailing Address 71 Gray Rd

City
Gorham

State
ME

Zip Code
04038-1110

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315210

Date of Disbursement

/ /

Amount of Each Disbursement this Period

813.24

B.

Full Name (Last, First, Middle Initial)

Lucas P Barks

Mailing Address 71 Gray Rd

City
Gorham

State
ME

Zip Code
04038-1110

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321717

Date of Disbursement

/ /

Amount of Each Disbursement this Period

689.48

C.

Full Name (Last, First, Middle Initial)

Craig Borkon

Mailing Address 8571 Brody Way

City
Boca Raton

State
FL

Zip Code
33433-7647

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321703

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1447.48

SUBTOTAL of Disbursements This Page (optional)

2950.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Craig Borkon	Transaction ID: D315200 Date of Disbursement
Mailing Address 8571 Brody Way ---	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Boca Raton State FL Zip Code 33433-7647	Amount of Each Disbursement this Period
Purpose of Disbursement Salary Candidate Name	<div> <div>1447.47</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) William Brookley	Transaction ID: D321731 Date of Disbursement
Mailing Address 1768 16th Ave N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Lake Worth State FL Zip Code 33460-6422	Amount of Each Disbursement this Period
Purpose of Disbursement Salary Candidate Name	<div> <div>295.52</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Kevin Chambliss	Transaction ID: D321718 Date of Disbursement
Mailing Address 746 N Annie Glidden Rd Apt 404	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Dekalb State IL Zip Code 60115-2130	Amount of Each Disbursement this Period
Purpose of Disbursement Salary Candidate Name	<div> <div>712.64</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2455.63

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Kevin Chambliss	Transaction ID: D315211 Date of Disbursement
Mailing Address 746 N Annie Glidden Rd Apt 404	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Dekalb IL 60115-2130	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>836.41</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ogden Frank Clark	Transaction ID: D315199 Date of Disbursement
Mailing Address 3100 NE 49th St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City State Zip Code Fort Lauderdale FL 33308-4902	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1014.39</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ogden Frank Clark	Transaction ID: D321702 Date of Disbursement
Mailing Address 3100 NE 49th St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City State Zip Code Fort Lauderdale FL 33308-4902	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1014.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2865.20

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 164 / 232

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Matthew Coppens</p> <p>Mailing Address 2830 4th St NW Apt 5</p> <p>City Naples State FL Zip Code 34120-1394</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D321719</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 666.32</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Matthew Coppens</p> <p>Mailing Address 2830 4th St NW Apt 5</p> <p>City Naples State FL Zip Code 34120-1394</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D315212</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 790.08</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Clifford Davy</p> <p>Mailing Address 5055 Wellington Park Cir Apt C18</p> <p>City Orlando State FL Zip Code 32839-4591</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D322924</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1154.37</p>

SUBTOTAL of Disbursements This Page (optional)

2610.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Michael Deutsch	Transaction ID: D321732 Date of Disbursement																				
Mailing Address 4125 Georges Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Boca Raton State FL Zip Code 33434-5345	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">295.52</td> </tr> </table>	295.52																			
295.52																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sabrina Diz	Transaction ID: D321720 Date of Disbursement																				
Mailing Address 142 SE 9th Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Hialeah State FL Zip Code 33010-5531	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">666.32</td> </tr> </table>	666.32																			
666.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Sabrina Diz	Transaction ID: D315213 Date of Disbursement																				
Mailing Address 142 SE 9th Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Hialeah State FL Zip Code 33010-5531	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">790.08</td> </tr> </table>	790.08																			
790.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1751.92

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

John Estes

Mailing Address 9884 SW 26th Ter

City
Miami

State
FL

Zip Code
33165-2627

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315214

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

836.41

B.

Full Name (Last, First, Middle Initial)

John Estes

Mailing Address 9884 SW 26th Ter

City
Miami

State
FL

Zip Code
33165-2627

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321721

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

712.64

C.

Full Name (Last, First, Middle Initial)

Florida Department of State

Mailing Address 500 S Bronough St
R A GRAY BLDG

City
Tallahassee

State
FL

Zip Code
32399-6504

Purpose of Disbursement
Voter File

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315622

Date of Disbursement

08 / 19 / 2010

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)

1559.05

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Florida Department of State

Mailing Address 500 S Bronough St
R A GRAY BLDG

City Tallahassee State FL Zip Code 32399-6504

Purpose of Disbursement
Voter File

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D314030

Date of Disbursement

08 / 11 / 2010

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Jason Garrett

Mailing Address PO Box 555

City Osprey State FL Zip Code 34229-0555

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315204

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

536.76

C.

Full Name (Last, First, Middle Initial)

Marcus Garza

Mailing Address 10505 Lake Williams Dr

City Odessa State FL Zip Code 33556-2643

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322925

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1037.55

SUBTOTAL of Disbursements This Page (optional)

1584.31

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Michael Gray

Mailing Address 920 E 3rd Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3147

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315205

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

1060.72

B.

Full Name (Last, First, Middle Initial)

Michael Gray

Mailing Address 920 E 3rd Ave

City
New Smyrna Beach

State
FL

Zip Code
32169-3147

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321712

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1060.73

C.

Full Name (Last, First, Middle Initial)

Derek Helmick

Mailing Address 3712 NW 49th Ln

City
Gainesville

State
FL

Zip Code
32605-1081

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321705

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1154.37

SUBTOTAL of Disbursements This Page (optional)

3275.82

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Derek Helmick

Mailing Address 3712 NW 49th Ln

City
Gainesville

State
FL

Zip Code
32605-1081

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315202

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1154.37

B.

Full Name (Last, First, Middle Initial)

Samantha Herman

Mailing Address 6064 Vista Linda Ln

City
Boca Raton

State
FL

Zip Code
33433-8223

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321733

Date of Disbursement

/ /

Amount of Each Disbursement this Period

316.30

C.

Full Name (Last, First, Middle Initial)

Evan Honor

Mailing Address 160 NW 70th St
Apt 104

City
Boca Raton

State
FL

Zip Code
33487-2379

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321734

Date of Disbursement

/ /

Amount of Each Disbursement this Period

106.20

SUBTOTAL of Disbursements This Page (optional)

1576.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Andrea D Huerfano

Mailing Address 2949 Riverside Dr
Apt 227

City State Zip Code
Coral Springs FL 33065-1017

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321722

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

666.32

B.

Full Name (Last, First, Middle Initial)

Andrea D Huerfano

Mailing Address 2949 Riverside Dr
Apt 227

City State Zip Code
Coral Springs FL 33065-1017

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315215

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

790.08

C.

Full Name (Last, First, Middle Initial)

Sidney Issac

Mailing Address 6876 Sugarloaf Key St

City State Zip Code
Lake Worth FL 33467-7652

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321735

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

214.71

SUBTOTAL of Disbursements This Page (optional)

1671.11

TOTAL This Period (last page this line number only)

	21b		22		23		24		25		26
	27		28a		28b		28c		29	x	30b

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

FEC Schedule B (Form 3X) (Revised 02/2003)

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)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Ben King	Transaction ID: D315207 Date of Disbursement
Mailing Address 3425 Mission Bay Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32817-1993	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>717.88</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ben King	Transaction ID: D321714 Date of Disbursement
Mailing Address 3425 Mission Bay Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Orlando State FL Zip Code 32817-1993	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>821.02</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mauricio Lamas	Transaction ID: D315223 Date of Disbursement
Mailing Address 23141 SW 124th Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Miami State FL Zip Code 33170-6309	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>923.50</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2462.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Mauricio Lamas

Mailing Address 23141 SW 124th Ave

City State Zip Code
Miami FL 33170-6309

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321738

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2010

Amount of Each Disbursement this Period

923.50

B.

Full Name (Last, First, Middle Initial)

Joshua H Loewenstein

Mailing Address 1908 NW 4th Ave
Apt 108

City State Zip Code
Boca Raton FL 33432-1501

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321701

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2010

Amount of Each Disbursement this Period

1060.73

C.

Full Name (Last, First, Middle Initial)

Joshua H Loewenstein

Mailing Address 1908 NW 4th Ave
Apt 108

City State Zip Code
Boca Raton FL 33432-1501

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315198

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2010

Amount of Each Disbursement this Period

1060.72

SUBTOTAL of Disbursements This Page (optional)

3044.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jason Lutin

Mailing Address 2540 NW 24th St

City
Boca Raton

State
FL

Zip Code
33434-4359

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315275

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1967.91

B.

Full Name (Last, First, Middle Initial)

Jason Lutin

Mailing Address 2540 NW 24th St

City
Boca Raton

State
FL

Zip Code
33434-4359

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322921

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1967.92

C.

Full Name (Last, First, Middle Initial)

Hector Martinez

Mailing Address 11100 SW 46th St

City
Miami

State
FL

Zip Code
33165-4735

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321725

Date of Disbursement

/ /

Amount of Each Disbursement this Period

666.32

SUBTOTAL of Disbursements This Page (optional)

4602.15

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Hector Martinez	Transaction ID: D315218 Date of Disbursement																				
Mailing Address 11100 SW 46th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Miami State FL Zip Code 33165-4735	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">790.08</td> </tr> </table>	790.08																			
790.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Emily McIlveene	Transaction ID: D315217 Date of Disbursement																				
Mailing Address 148 Meadow Brook Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Rock Spring State GA Zip Code 30739-2341	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">813.24</td> </tr> </table>	813.24																			
813.24																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Emily McIlveene	Transaction ID: D321724 Date of Disbursement																				
Mailing Address 148 Meadow Brook Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Rock Spring State GA Zip Code 30739-2341	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">689.48</td> </tr> </table>	689.48																			
689.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2292.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Alyssa Miller

Mailing Address 900 Riggins Rd
Apt 723

City Tallahassee State FL Zip Code 32308-2220

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322918

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1295.39

B.

Full Name (Last, First, Middle Initial)

Ms. Anne O Morgan

Mailing Address 741 W Keller St

City Hernando State FL Zip Code 34442-8810

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322832

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

2907.78

C.

Full Name (Last, First, Middle Initial)

Ms. Anne O Morgan

Mailing Address 741 W Keller St

City Hernando State FL Zip Code 34442-8810

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315264

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

2907.77

SUBTOTAL of Disbursements This Page (optional)

7110.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

George Morse

Mailing Address 1908 NW 41st Ave Apt 108

City State Zip Code
Boca Raton FL 33432

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321704

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1014.40

B.

Full Name (Last, First, Middle Initial)

George Morse

Mailing Address 1908 NW 41st Ave Apt 108

City State Zip Code
Boca Raton FL 33432

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315201

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1014.39

C.

Full Name (Last, First, Middle Initial)

Cary Nation

Mailing Address 1400 NW 9th Ave
Apt 16

City State Zip Code
Boca Raton FL 33486-1326

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321736

Date of Disbursement

/ /

Amount of Each Disbursement this Period

355.55

SUBTOTAL of Disbursements This Page (optional)

2384.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Sophia Nelson	Transaction ID: D321706 Date of Disbursement																				
Mailing Address 5883 Caribbean Blvd Apt 33407	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City West Palm Beach State FL Zip Code 33407-1801	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1192.25</td> </tr> </table>	1192.25																			
1192.25																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Tarin Nix	Transaction ID: D321715 Date of Disbursement																				
Mailing Address 2704 French Pl Apt G	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Austin State TX Zip Code 78722-2330	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2129.32</td> </tr> </table>	2129.32																			
2129.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Tarin Nix	Transaction ID: D315208 Date of Disbursement																				
Mailing Address 2704 French Pl Apt G	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Austin State TX Zip Code 78722-2330	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">2129.32</td> </tr> </table>	2129.32																			
2129.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5450.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Bernadette Ohran

Mailing Address 155 55th Ave NE

City
Saint Petersburg

State
FL

Zip Code
33703-3011

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322927

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1076.76

B.

Full Name (Last, First, Middle Initial)

Joseph J Pierce

Mailing Address 2656 S Scenic Hwy

City
Lake Wales

State
FL

Zip Code
33898-7409

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D322928

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

1014.39

C.

Full Name (Last, First, Middle Initial)

Douglas R. Pugh

Mailing Address PO Box 272813

City
Boca Raton

State
FL

Zip Code
33427-2813

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321709

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

80.81

SUBTOTAL of Disbursements This Page (optional)

2171.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Michael Pugh	Transaction ID: D321708 Date of Disbursement																				
Mailing Address 611 SE 10th St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Pompano Beach State FL Zip Code 33060-9405	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">419.77</td> </tr> </table>	419.77																			
419.77																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Maria Quezada	Transaction ID: D321726 Date of Disbursement																				
Mailing Address 322 E Mayfield Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City San Antonio State TX Zip Code 78214-2448	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">666.32</td> </tr> </table>	666.32																			
666.32																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Maria Quezada	Transaction ID: D315219 Date of Disbursement																				
Mailing Address 322 E Mayfield Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City San Antonio State TX Zip Code 78214-2448	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">790.08</td> </tr> </table>	790.08																			
790.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1876.17

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Margaret Ramirez	Transaction ID: D322933 Date of Disbursement
Mailing Address 13671 SW 38th Avenue Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Ocala State FL Zip Code 34473-2105	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>566.09</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Pamela Rivera	Transaction ID: D315206 Date of Disbursement
Mailing Address 232 Afton Sq Unit 212	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div>
City Altamonte Springs State FL Zip Code 32714-3848	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1037.56</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Pamela Rivera	Transaction ID: D321713 Date of Disbursement
Mailing Address 232 Afton Sq Unit 212	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Altamonte Springs State FL Zip Code 32714-3848	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>1037.56</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2641.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Denise Rodriguez

Mailing Address 12514 Wandering Brook Dr

City State Zip Code
Charlotte NC 28273-6974

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D321727

Date of Disbursement

/ /

Amount of Each Disbursement this Period

666.32

B.

Full Name (Last, First, Middle Initial)

Denise Rodriguez

Mailing Address 12514 Wandering Brook Dr

City State Zip Code
Charlotte NC 28273-6974

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315220

Date of Disbursement

/ /

Amount of Each Disbursement this Period

790.08

C.

Full Name (Last, First, Middle Initial)

William Sanchez

Mailing Address 698 NW 134th PI

City State Zip Code
Miami FL 33182-1668

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D315221

Date of Disbursement

/ /

Amount of Each Disbursement this Period

836.41

SUBTOTAL of Disbursements This Page (optional)

2292.81

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) William Sanchez	Transaction ID: D321728 Date of Disbursement
Mailing Address 698 NW 134th PI	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Miami State FL Zip Code 33182-1668	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>712.64</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Justin Shoham	Transaction ID: D321729 Date of Disbursement
Mailing Address 28 Lark PI	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 0 / 2 0 1 0</div> </div>
City Old Bridge State NJ Zip Code 08857-3062	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>666.32</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Justin Shoham	Transaction ID: D315582 Date of Disbursement
Mailing Address 28 Lark PI	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 1 0</div> </div>
City Old Bridge State NJ Zip Code 08857-3062	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>790.08</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2169.04

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City
Old Bridge

State
NJ

Zip Code
08857-3062

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D315222

Date of Disbursement

M M / D D / Y Y Y Y
08 / 15 / 2010

Amount of Each Disbursement this Period

790.08

B.

Full Name (Last, First, Middle Initial)

Justin Shoham

Mailing Address 28 Lark Pl

City
Old Bridge

State
NJ

Zip Code
08857-3062

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D313280

Date of Disbursement

M M / D D / Y Y Y Y
08 / 05 / 2010

Amount of Each Disbursement this Period

890.08

C.

Full Name (Last, First, Middle Initial)

Jacob Smith

Mailing Address 2121 Intracoastal Dr

City
Fort Lauderdale

State
FL

Zip Code
33305-3637

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D322931

Date of Disbursement

M M / D D / Y Y Y Y
08 / 30 / 2010

Amount of Each Disbursement this Period

554.12

SUBTOTAL of Disbursements This Page (optional)

2234.28

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A.

Full Name (Last, First, Middle Initial)

Jacob Smith

Mailing Address 2121 Intracoastal Dr

City State Zip Code
Fort Lauderdale FL 33305-3637

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D324666

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

554.12

B.

Full Name (Last, First, Middle Initial)

Joshua Solomon

Mailing Address 5575 NW 119th Drive

City State Zip Code
Pompano Beach FL 33076

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321737

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

327.84

C.

Full Name (Last, First, Middle Initial)

Rafael Suarez

Mailing Address 100 Golden Isles Dr
Apt 1003

City State Zip Code
Hallandale Beach FL 33009-8811

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D321710

Date of Disbursement

08 / 30 / 2010

Amount of Each Disbursement this Period

168.54

SUBTOTAL of Disbursements This Page (optional)

1050.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 186 / 232

<input 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 checked="" 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)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Omar Syed	Transaction ID: D326753 Date of Disbursement																				
Mailing Address 13538 Lake Magdalene Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Tampa State FL Zip Code 33613-4130	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1037.55</td> </tr> </table>	1037.55																			
1037.55																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ms. Karen L. Thurman	Transaction ID: D322915 Date of Disbursement																				
Mailing Address 9067 SW 190th Avenue Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Dunnellon State FL Zip Code 34432-2827	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">3232.95</td> </tr> </table>	3232.95																			
3232.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ms. Karen L. Thurman	Transaction ID: D315269 Date of Disbursement																				
Mailing Address 9067 SW 190th Avenue Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Dunnellon State FL Zip Code 34432-2827	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">3232.95</td> </tr> </table>	3232.95																			
3232.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7503.45

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) Jennifer Whitcomb	Transaction ID: D322930 Date of Disbursement																				
Mailing Address 1734 Bulavista Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Jacksonville State FL Zip Code 32221-5458	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">1230.93</td> </tr> </table>	1230.93																			
1230.93																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D321700 Date of Disbursement																				
Mailing Address 5760 Braveheart Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	0		2	0	1	0												
City Tallahassee State FL Zip Code 32317-9409	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">821.02</td> </tr> </table>	821.02																			
821.02																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Matthew Wilson	Transaction ID: D315197 Date of Disbursement																				
Mailing Address 5760 Braveheart Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	1	0												
City Tallahassee State FL Zip Code 32317-9409	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary	<table border="1"> <tr> <td colspan="10">821.02</td> </tr> </table>	821.02																			
821.02																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2872.97

TOTAL This Period (last page this line number only)

87629.94

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 188 / 232

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Production Resource Group

Nature of Debt (Purpose):
 Audio Visual/Conference

Mailing Address 1902 Cypress Lake Dr

City	State	ZIP Code
Orlando	FL	32837-8458

Outstanding Balance Beginning This Period

18541.50

Transaction ID: D119404

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18541.50

1) **SUBTOTALS** This Period This Page (optional)..... ▶

18541.50

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

18541.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

18541.50

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 189 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

 City State Zip Code
Tallahassee FL 32308-2220

 Purpose of Disbursement:
Salary
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
 08 / 15 / 2010

Transaction ID: D315272

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
272.03		1023.35		1295.38

B. Full Name (Last, First, Middle Initial)
Alyssa Miller

Mailing Address

900 Riggins Rd Apt 723

 City State Zip Code
Tallahassee FL 32308-2220

 Purpose of Disbursement:
Travel/Meals
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
 08 / 20 / 2010

Transaction ID: D320093

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

C. Full Name (Last, First, Middle Initial)
American Airlines

Mailing Address

PO Box 250550 MD 755

 City State Zip Code
Tulsa OK 74158

 Purpose of Disbursement:
Air Travel
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
 08 / 12 / 2010

Transaction ID: D314997

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.25		377.15		477.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
405.88		1526.90		1932.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 190 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
American Airlines

Mailing Address

PO Box 250550 MD 755

 City State Zip Code
Tulsa OK 74158

 Purpose of Disbursement:
Air Travel
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: D314038

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.71		239.69		303.40

B. Full Name (Last, First, Middle Initial)
American Airlines

Mailing Address

PO Box 250550 MD 755

 City State Zip Code
Tulsa OK 74158

 Purpose of Disbursement:
Air Travel
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 1 0

Transaction ID: D314039

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.77		228.63		289.40

C. Full Name (Last, First, Middle Initial)
American Express Merchant Services

Mailing Address

PO Box 53852

 City State Zip Code
Phoenix AZ 85072-3852

 Purpose of Disbursement:
Merchant Service Fees
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
0 8 / 2 0 / 2 0 1 0

Transaction ID: D323392

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.16		263.94		334.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.64		732.26		926.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 191 / 232
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
 Anagram Corporation

Mailing Address

310 W Jefferson St

City

State

Zip Code

Tallahassee

FL

32301-1419

Purpose of Disbursement:
 Admin Lease/Rent

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date / /

Transaction ID: D321948

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

801.41

3014.84

3816.25

B. Full Name (Last, First, Middle Initial)
 Avis Rent A Car - Corporate

Mailing Address

6 Sylvan Way

City

State

Zip Code

Parsippany

NJ

07054-3826

Purpose of Disbursement:
 Auto Travel

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date / /

Transaction ID: D323393

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.56

84.89

107.45

C. Full Name (Last, First, Middle Initial)
 Beaven for Congress

Mailing Address

PO Box 352084

City

State

Zip Code

Palm Coast

FL

32135-2084

Purpose of Disbursement:
 Contribution

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date / /

Transaction ID: D314022

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

420.00

1580.00

2000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1243.97

4679.73

5923.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 192 / 232

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Blue State Digital, LLC

Mailing Address

734 15th St NW Ste 1200

City	State	Zip Code
Washington	DC	20005-1013

Purpose of Disbursement:
Admin WebsiteCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 09 / 2010

Transaction ID: D314775

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

293.42

1103.83

1397.25

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

Century Link

Mailing Address

PO Box 96064

City	State	Zip Code
Charlotte	NC	28296-0064

Purpose of Disbursement:
Admin TelephoneCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 03 / 2010

Transaction ID: D313353

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

116.18

437.07

553.25

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

Ms. Christina Boltin

Mailing Address

2413 Bayshore Blvd

City	State	Zip Code
Tampa	FL	33629-7333

Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 15 / 2010

Transaction ID: D315260

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

370.68

1394.45

1765.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

780.28

2935.35

3715.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 193 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Ms. Christina Boltin

Mailing Address

2413 Bayshore Blvd

City	State	Zip Code
Tampa	FL	33629-7333

Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D322830

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
370.68		1394.44		1765.12

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

Christopher Lazo

Mailing Address

1951 N Meridian Rd Apt 28

City	State	Zip Code
Tallahassee	FL	32303-5249

Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D322919

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

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

Christopher Lazo

Mailing Address

1951 N Meridian Rd Apt 28

City	State	Zip Code
Tallahassee	FL	32303-5249

Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 15 / 2010

Transaction ID: D315273

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
177.28		666.90		844.18

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
725.24		2728.24		3453.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 194 / 232

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
City of Miami Beach

Mailing Address

1700 Convention Center Dr Special Events Division

City	State	Zip Code
Miami Beach	FL	33139-1819

Purpose of Disbursement:
Auto Travel

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315474

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.73

59.17

74.90

B. Full Name (Last, First, Middle Initial)
City of Tallahassee

Mailing Address

600 N Monroe St

City	State	Zip Code
Tallahassee	FL	32301-1262

Purpose of Disbursement:
Admin Utilities

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D321952

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

472.13

1776.09

2248.22

C. Full Name (Last, First, Middle Initial)
Crown Plaza Palm Beach

Mailing Address

1601 Belvedere Rd

City	State	Zip Code
West Palm Beach	FL	33406-1541

Purpose of Disbursement:
Travel/Lodging

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D323398

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

74.32

279.60

353.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

562.18

2114.86

2677.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 195 / 232
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
 Custom Wristbands

Mailing Address

21365 Gateway Ct

City

Brookfield

State

WI

Zip Code

53045-5149

Purpose of Disbursement:
 Event Wristbands

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 08 / 19 / 2010

Transaction ID: D315729

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.10

7.90

10.00

B. Full Name (Last, First, Middle Initial)
 Custom Wristbands

Mailing Address

21365 Gateway Ct

City

Brookfield

State

WI

Zip Code

53045-5149

Purpose of Disbursement:
 Event Wristbands

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 08 / 11 / 2010

Transaction ID: D315730

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

17.75

66.75

84.50

C. Full Name (Last, First, Middle Initial)
 DeltaCom1058

Mailing Address

PO Box 740597

City

Atlanta

State

GA

Zip Code

30374-0597

Purpose of Disbursement:
 Admin Telephone

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 08 / 16 / 2010

Transaction ID: D315473

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

150.37

565.70

716.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

170.22

640.35

810.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 196 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Democratic Black Caucus of Florida

Mailing Address

2060 NW 48th Ter Ruth Lynch

 City State Zip Code
Lauderhill FL 33313-4166
Purpose of Disbursement:
ContributionCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 20 / 2010

Transaction ID: D315737

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

B. Full Name (Last, First, Middle Initial)
Division of Corporations

Mailing Address

PO Box 6327

 City State Zip Code
Tallahassee FL 32314-6327
Purpose of Disbursement:
PrintingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 31 / 2010

Transaction ID: D321945

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.94		11.06		14.00

C. Full Name (Last, First, Middle Initial)
Eric Jotkoff

Mailing Address

2806 W Wallace Ave

 City State Zip Code
Tampa FL 33611-4537
Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 15 / 2010

Transaction ID: D315261

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
331.94		1248.72		1580.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
649.88		2444.78		3094.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 197 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Eric Jotkoff

Mailing Address

2806 W Wallace Ave

City	State	Zip Code
Tampa	FL	33611-4537

 Purpose of Disbursement:
Salary
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: D322831

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
189.68		1390.97		1580.65

B. Full Name (Last, First, Middle Initial)
Eric Perrott

Mailing Address

704 G St NE Apt B

City	State	Zip Code
Washington	DC	20002-3681

 Purpose of Disbursement:
Consulting/IT
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	1	0

Transaction ID: D314836

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial)
Everest National Insurance Company

Mailing Address

PO Box 917807

City	State	Zip Code
Orlando	FL	32891-7807

 Purpose of Disbursement:
Benefits
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	1	0

Transaction ID: D313477

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.96		172.88		218.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.64		2353.85		2799.49

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 198 / 232
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
 FedEx Office

Mailing Address

666 W Tennessee St

City

State

Zip Code

Tallahassee

FL

32304-7989

Purpose of Disbursement:
 Printing

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 08 / 06 / 2010

Transaction ID: D313709

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.55

24.63

31.18

B. Full Name (Last, First, Middle Initial)
 Fontainebleau Resort

Mailing Address

4441 Collins Ave

City

State

Zip Code

Miami Beach

FL

33140-3227

Purpose of Disbursement:
 Travel/Lodging

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 08 / 19 / 2010

Transaction ID: D323389

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

76.65

288.34

364.99

C. Full Name (Last, First, Middle Initial)
 Fontainebleau Resort

Mailing Address

4441 Collins Ave

City

State

Zip Code

Miami Beach

FL

33140-3227

Purpose of Disbursement:
 Travel/Lodging

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 08 / 23 / 2010

Transaction ID: D323395

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

81.99

308.43

390.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

165.19

621.40

786.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 199 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Fontainebleau Resort

Mailing Address

4441 Collins Ave

City	State	Zip Code
Miami Beach	FL	33140-3227

Purpose of Disbursement:
Travel/Lodging

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D323396

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.25

4.70

5.95

B. Full Name (Last, First, Middle Initial)
Fontainebleau Resort

Mailing Address

4441 Collins Ave

City	State	Zip Code
Miami Beach	FL	33140-3227

Purpose of Disbursement:
Travel/Lodging

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	2

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D314998

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

62.63

235.60

298.23

C. Full Name (Last, First, Middle Initial)
Fontainebleau Resort

Mailing Address

4441 Collins Ave

City	State	Zip Code
Miami Beach	FL	33140-3227

Purpose of Disbursement:
Site Rental

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315685

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1860.07

6997.43

8857.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1923.95

7237.73

9161.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Fontainebleau Resort

 Mailing Address
4441 Collins Ave

City	State	Zip Code
Miami Beach	FL	33140-3227

 Purpose of Disbursement:
Travel/Lodging

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	1	0

Transaction ID: D314044

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

99.26

373.40

472.66

B. Full Name (Last, First, Middle Initial)
Fontainebleau Resort

 Mailing Address
4441 Collins Ave

City	State	Zip Code
Miami Beach	FL	33140-3227

 Purpose of Disbursement:
Travel Lodging

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	9	/	2	0	1	0

Transaction ID: D315717

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

52.32

196.80

249.12

C. Full Name (Last, First, Middle Initial)
Fontainebleau Resort

 Mailing Address
4441 Collins Ave

City	State	Zip Code
Miami Beach	FL	33140-3227

 Purpose of Disbursement:
Travel/Lodging

 Category/
Type

 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	1	0

Transaction ID: D314041

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

85.18

320.46

405.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

236.76

890.66

1127.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 201 / 232
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
 Greenberg Qulian Rosner Research

Mailing Address

10 G St NE Ste 500

City State Zip Code
 Washington DC 20002-4228

Purpose of Disbursement:
 Consulting/Research

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 0 8 / 1 0 / 2 0 1 0

Transaction ID: D313842

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

B. Full Name (Last, First, Middle Initial)
 Hampton Inn Corporate

Mailing Address

9336 Civic Center Dr

City State Zip Code
 Beverly Hills CA 90210-3604

Purpose of Disbursement:
 Travel/Lodging

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 0 8 / 3 0 / 2 0 1 0

Transaction ID: D323401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.23		30.97		39.20

C. Full Name (Last, First, Middle Initial)
 Hampton Inn Corporate

Mailing Address

9336 Civic Center Dr

City State Zip Code
 Beverly Hills CA 90210-3604

Purpose of Disbursement:
 Travel/Lodging

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
 0 8 / 3 1 / 2 0 1 0

Transaction ID: D323402

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.23		30.97		39.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1066.46		4011.94		5078.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Hampton Inn Corporate

Mailing Address

9336 Civic Center Dr

City

State

Zip Code

Beverly Hills

CA

90210-3604

Purpose of Disbursement:
Travel/LodgingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D323403

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

38.44

144.60

183.04

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

Hilton Hotels Corporate

Mailing Address

7930 Jones Branch Dr Ste 100

City

State

Zip Code

Mc Lean

VA

22102-3389

Purpose of Disbursement:
Travel/LodgingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D315713

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.38

133.08

168.46

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

Hilton Hotels Corporate

Mailing Address

7930 Jones Branch Dr Ste 100

City

State

Zip Code

Mc Lean

VA

22102-3389

Purpose of Disbursement:
Travel/LodgingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D315714

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

91.70

344.95

436.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

165.52

622.63

788.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 203 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address

2500 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20037-1611

Purpose of Disbursement:
Travel/LodgingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 10 / 2010

Transaction ID: D323391

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.59		160.23		202.82

B. Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address

2500 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20037-1611

Purpose of Disbursement:
Travel/LodgingCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 10 / 2010

Transaction ID: D323390

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.59		160.23		202.82

C. Full Name (Last, First, Middle Initial)
Intermedia.Net

Mailing Address

156 W 56th St Ste 1601

City	State	Zip Code
New York	NY	10019-3878

Purpose of Disbursement:
Admin InternetCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 23 / 2010

Transaction ID: D323295

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.90		153.88		194.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.08		474.34		600.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 204 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Intermedia.Net

Mailing Address

156 W 56th St Ste 1601

 City State Zip Code
New York NY 10019-3878

 Purpose of Disbursement:
Admin Internet
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 1 0

Transaction ID: D314033

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

108.57

408.43

517.00

B. Full Name (Last, First, Middle Initial)
Internal Revenue Service Center

Mailing Address

PO Box 409101

 City State Zip Code
Ogden UT 84409-9101

 Purpose of Disbursement:
Tax
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: D314781

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

43.39

163.21

206.60

C. Full Name (Last, First, Middle Initial)
Intuit Software

Mailing Address

2632 Marine Way

 City State Zip Code
Mountain View CA 94043-1126

 Purpose of Disbursement:
Admin Office Supplies
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date M M / D D / Y Y Y Y
0 8 / 0 2 / 2 0 1 0

Transaction ID: D313313

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

29.34

110.38

139.72

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

181.30

682.02

863.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 205 / 232

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
 Jet Blue

Mailing Address

11829 Queens Blvd

City

State

Zip Code

Forest Hills

NY

11375-7212

Purpose of Disbursement:

Air Travel

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	3	/	2	0	1	0

Transaction ID: D325503

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

63.29

238.11

301.40

B. Full Name (Last, First, Middle Initial)
 John E Rogers

Mailing Address

2257 Collins Rd

City

State

Zip Code

Cairo

GA

39828-4917

Purpose of Disbursement:

Salary

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: D322920

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

75.63

284.53

360.16

C. Full Name (Last, First, Middle Initial)
 John E Rogers

Mailing Address

2257 Collins Rd

City

State

Zip Code

Cairo

GA

39828-4917

Purpose of Disbursement:

Salary

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	1	0

Transaction ID: D315274

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

76.90

289.27

366.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

215.82

811.91

1027.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 206 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Kyle Schulberg

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Mailing Address

9886 N Kendall Dr Apt H113

 City State Zip Code
 Miami FL 33176-1827
Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Date 08 / 15 / 2010

Transaction ID: D315265

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
268.22		1009.04		1277.26

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

Kyle Schulberg

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Mailing Address

9886 N Kendall Dr Apt H113

 City State Zip Code
 Miami FL 33176-1827
Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Date 08 / 30 / 2010

Transaction ID: D322833

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
268.22		1009.04		1277.26

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

Lowes

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Mailing Address

1000 Lowes Blvd

 City State Zip Code
 Mooresville NC 28117-8520
Purpose of Disbursement:
Admin Office SuppliesCategory/
TypeActivity or Event Identifier:
Administrative

Date 08 / 26 / 2010

Transaction ID: D323397

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.71		17.73		22.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
541.15		2035.81		2576.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Microsoft Office

Mailing Address

1 Microsoft Way

City	State	Zip Code
Redmond	WA	98052-8300

Purpose of Disbursement:
Admin SoftwareCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D320306

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

31.59

118.86

150.45

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

Mildred O. Smith

Mailing Address

3550 Esplanade Way Apt 8107

City	State	Zip Code
Tallahassee	FL	32311-3755

Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315266

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

317.53

1194.51

1512.04

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

Mildred O. Smith

Mailing Address

3550 Esplanade Way Apt 8107

City	State	Zip Code
Tallahassee	FL	32311-3755

Purpose of Disbursement:
SalaryCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D322912

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

317.53

1194.52

1512.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

666.65

2507.89

3174.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 208 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Mildred O. Smith

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Mailing Address

3550 Esplanade Way Apt 8107

 City State Zip Code
 Tallahassee FL 32311-3755
Purpose of Disbursement:
Travel/MealsCategory/
TypeActivity or Event Identifier:
Administrative

Date 08 / 20 / 2010

Transaction ID: D320102

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

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

Ms. Judy C. Mount

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Mailing Address

4844 Tall Pine Dr Ste 201

 City State Zip Code
 Marianna FL 32446-8147
Purpose of Disbursement:
Travel ExpenseCategory/
TypeActivity or Event Identifier:
Administrative

Date 08 / 26 / 2010

Transaction ID: D321949

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
77.67		292.17		369.84

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

Nassau County Supervisor of Elections

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Mailing Address

96135 Nassau PI

 City State Zip Code
 Yulee FL 32097-8634
Purpose of Disbursement:
PrintingCategory/
TypeActivity or Event Identifier:
Administrative

Date 08 / 16 / 2010

Transaction ID: D315476

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.33		1.23		1.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
393.00		1478.40		1871.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 209 / 232
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
 Nassau County Supervisor of Elections

Mailing Address

96135 Nassau PI

City	State	Zip Code
Yulee	FL	32097-8634

Purpose of Disbursement:
 Printing

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
0	4

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D313579

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.47		5.53		7.00

B. Full Name (Last, First, Middle Initial)
 Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City	State	Zip Code
Tallahassee	FL	32304-2868

Purpose of Disbursement:
 Salary

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315268

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.67		1037.56

C. Full Name (Last, First, Middle Initial)
 Nicholas Pellito

Mailing Address

445 Appleyard Dr Apt A2-5

City	State	Zip Code
Tallahassee	FL	32304-2868

Purpose of Disbursement:
 Salary

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D322914

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.89		819.66		1037.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
437.25		1644.86		2082.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Office Depot-Corporate

Mailing Address

PO Box 633211

City	State	Zip Code
Cincinnati	OH	45263-3211

Purpose of Disbursement:
Admin Office SuppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D323399

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.89		108.69		137.58

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

One Source Supply Center

Mailing Address

5855 Green Valley Cir Ste 206

City	State	Zip Code
Culver City	CA	90230-6968

Purpose of Disbursement:
Admin Office SuppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 26 / 2010

Transaction ID: D321946

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
222.18		835.82		1058.00

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

Osmond Johnson Janitorial Service

Mailing Address

24131 Lake Talquin Rd

City	State	Zip Code
Tallahassee	FL	32310-4603

Purpose of Disbursement:
Janitorial ServiceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 04 / 2010

Transaction ID: D313581

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
377.07		1418.51		1795.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Mailing Address
PO Box 7084

City State Zip Code
Alexandria VA 22307-0084

Purpose of Disbursement:
Consulting/Compliance
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D313356

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

315.00

1185.00

1500.00

B. Full Name (Last, First, Middle Initial)
PAi

Mailing Address
PO Box 60

City State Zip Code
De Pere WI 54115-0060

Purpose of Disbursement:
Benefits
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	9

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315731

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.93

105.07

133.00

C. Full Name (Last, First, Middle Initial)
PAi

Mailing Address
PO Box 60

City State Zip Code
De Pere WI 54115-0060

Purpose of Disbursement:
Benefits
Category/
Type
Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
0	2

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D313309

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.86

210.14

266.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

398.79

1500.21

1899.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Payroll Matters

Mailing Address

2069 N Monroe St

City

State

Zip Code

Tallahassee

FL

32303-4727

Purpose of Disbursement:

Payroll Fees

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: D324664

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.65

51.35

65.00

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

Payroll Matters

Mailing Address

2069 N Monroe St

City

State

Zip Code

Tallahassee

FL

32303-4727

Purpose of Disbursement:

Payroll Fees

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	1	0

Transaction ID: D315225

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.19

38.31

48.50

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

Payroll Matters

Mailing Address

2069 N Monroe St

City

State

Zip Code

Tallahassee

FL

32303-4727

Purpose of Disbursement:

Payroll Tax

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	1	0

Transaction ID: D315226

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1101.82

4144.96

5246.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1125.66

4234.62

5360.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 213 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Payroll Matters

Mailing Address

2069 N Monroe St

City	State	Zip Code
Tallahassee	FL	32303-4727

Purpose of Disbursement:
Payroll Tax

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D322531

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

978.77

3682.02

4660.79

B. Full Name (Last, First, Middle Initial)
Protective Barrier Service

Mailing Address

900 Patterson Dr

City	State	Zip Code
Bloomsburg	PA	17815-2927

Purpose of Disbursement:
Event Barrier Expense

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	8

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315732

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

83.14

312.76

395.90

C. Full Name (Last, First, Middle Initial)
Purchase Power

Mailing Address

PO Box 371874 P.O. Box 856042

City	State	Zip Code
Pittsburgh	PA	15250-7874

Purpose of Disbursement:
Admin Postage

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D321955

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

192.46

724.02

916.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1254.37

4718.80

5973.17

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 214 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Ricoh Americas Corporation

Mailing Address

21146 Network Pl

City	State	Zip Code
Chicago	IL	60673-1211

Purpose of Disbursement:
Admin Lease/Rent

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D321951

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.00		850.20		1076.20

B. Full Name (Last, First, Middle Initial)
Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:
Travel/Meals

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	3

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315251

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

C. Full Name (Last, First, Middle Initial)
Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:
Salary

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315267

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
888.74		3343.35		4232.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1148.34		4319.95		5468.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 215 / 232

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Mailing Address

1544 Lorimier Rd

City

State

Zip Code

Jacksonville

FL

32207-4240

Purpose of Disbursement:
Salary

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D322913

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

888.74

3343.35

4232.09

B. Full Name (Last, First, Middle Initial)
Service Office Supply

Mailing Address

PO Box 15038

City

State

Zip Code

Tallahassee

FL

32317-5038

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 03 / 2010

Transaction ID: D313354

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

116.37

437.79

554.16

C. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address

2425 Wyman St

City

State

Zip Code

Dallas

TX

75235-2501

Purpose of Disbursement:
Air Travel

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 12 / 2010

Transaction ID: D314999

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.24

102.46

129.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1032.35

3883.60

4915.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 216 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address

2425 Wyman St

City	State	Zip Code
Dallas	TX	75235-2501

 Purpose of Disbursement:
Air Travel
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	1	0

Transaction ID: D314037

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.24		102.46		129.70

B. Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address

2425 Wyman St

City	State	Zip Code
Dallas	TX	75235-2501

 Purpose of Disbursement:
Air Travel
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: D322606

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.34		110.36		139.70

C. Full Name (Last, First, Middle Initial)
State of Florida

Mailing Address

A Gray 500 South Bronough Street

City	State	Zip Code
Tallahassee	FL	32399-0001

 Purpose of Disbursement:
Sales Tax
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	3	/	2	0	1	0

Transaction ID: D315099

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.51		20.74		26.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.09		233.56		295.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 217 / 232

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City	State	Zip Code
Tampa	FL	33629-4756

Purpose of Disbursement:
Salary

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D322917

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

177.28

666.90

844.18

B. Full Name (Last, First, Middle Initial)
Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City	State	Zip Code
Tampa	FL	33629-4756

Purpose of Disbursement:
Salary

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315271

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

177.28

666.90

844.18

C. Full Name (Last, First, Middle Initial)
T-Mobile

Mailing Address

PO Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

Purpose of Disbursement:
Admin Cell Phone

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D315248

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.92

142.67

180.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

392.48

1476.47

1868.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 218 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
T-Mobile

 Mailing Address
PO Box 742596

City	State	Zip Code
Cincinnati	OH	45274-2596

 Purpose of Disbursement:
Admin Cell Phone
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	1	0

Transaction ID: D313355

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.79		85.75		108.54

B. Full Name (Last, First, Middle Initial)
Tracy N Henderson

 Mailing Address
213 Young St

City	State	Zip Code
Tallahassee	FL	32301-5437

 Purpose of Disbursement:
Salary
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	0	/	2	0	1	0

Transaction ID: D322929

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.59		965.27		1221.86

C. Full Name (Last, First, Middle Initial)
Tracy N Henderson

 Mailing Address
213 Young St

City	State	Zip Code
Tallahassee	FL	32301-5437

 Purpose of Disbursement:
Salary
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

 Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	1	0

Transaction ID: D315276

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
214.59		807.26		1021.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
493.97		1858.28		2352.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 219 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Trophies Tomorrow

Mailing Address

220 Greenview Dr

City

State

Zip Code

Pagosa Springs

CO

81147-7769

Purpose of Disbursement:

Admin Office Supplies

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 11 / 2010

Transaction ID: D314036

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.18		23.27		29.45

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

U.S. Postmaster-Miami

Mailing Address

2200 NW 72nd Ave

City

State

Zip Code

Miami

FL

33152-9001

Purpose of Disbursement:

Admin Postage

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 11 / 2010

Transaction ID: D314021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.85		146.15		185.00

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

UPS

Mailing Address

PO Box 72470244

City

State

Zip Code

Philadelphia

PA

19170-0001

Purpose of Disbursement:

Admin Shipping

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 16 / 2010

Transaction ID: D315472

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.96		142.78		180.74

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.99		312.20		395.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 220 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
UPS

Mailing Address

PO Box 72470244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:
Admin Shipping

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D313358

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.77

51.78

65.55

B. Full Name (Last, First, Middle Initial)
UPS

Mailing Address

PO Box 72470244

City	State	Zip Code
Philadelphia	PA	19170-0001

Purpose of Disbursement:
Admin Shipping

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
2	6

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D321956

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.80

18.05

22.85

C. Full Name (Last, First, Middle Initial)
WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City	State	Zip Code
Bentonville	AR	72716-6209

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M	M
0	8

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	1	0

Transaction ID: D323400

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.70

55.30

70.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

33.27

125.13

158.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 221 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 16 / 2010

Transaction ID: D315278

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.98		37.53		47.51

B. Full Name (Last, First, Middle Initial)
WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 03 / 2010

Transaction ID: D313406

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.80		85.77		108.57

C. Full Name (Last, First, Middle Initial)
WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 11 / 2010

Transaction ID: D314032

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.13		75.72		95.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.91		199.02		251.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 222 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
WebDomains4u.com

Mailing Address

14455 N Hayden Rd Ste 219

City State Zip Code
Scottsdale AZ 85260-6993

Purpose of Disbursement:
Admin Internet

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
0 8 / 0 2 / 2 0 1 0

Transaction ID: D315711

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.06		143.20		181.26

B. Full Name (Last, First, Middle Initial)
Ms. Christina Boltin

Mailing Address

2413 Bayshore Blvd

City State Zip Code
Tampa FL 33629-7333

Purpose of Disbursement:
Staff Reimbursement

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: D313573

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.36		106.68		135.04

C. Full Name (Last, First, Middle Initial)
Office Depot-Corporate

Mailing Address

PO Box 633211

City State Zip Code
Cincinnati OH 45263-3211

Purpose of Disbursement:
Admin Office Supplies

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: D313575

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.16		11.88		15.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.42		249.88		316.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 223 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address

PO Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement:
Admin Cell Phone

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 05 / 2010

Transaction ID: D313574

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

25.20

94.80

120.00

B. Full Name (Last, First, Middle Initial)
Ms. Anne O Morgan

Mailing Address

741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:
Staff Reimbursement

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D313747

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

C. Full Name (Last, First, Middle Initial)
Blue Cross and Blue Shield of Florida

Mailing Address

PO Box 2210

City	State	Zip Code
Jacksonville	FL	32203-2210

Purpose of Disbursement:
Benefits

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D313748

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 224 / 232
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Ms. Karen L. Thurman

Mailing Address

9067 SW 190th Avenue Rd

City

State

Zip Code

Dunnellon

FL

34432-2827

Purpose of Disbursement:
Staff ReimbursementCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Activity or Event Identifier:
AdministrativeDate

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	1	0

Transaction ID: D314842

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

82.77

311.37

394.14

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

Capital Hilton

Mailing Address

1001 16th St NW

City

State

Zip Code

Washington

DC

20036-5701

Purpose of Disbursement:
Travel/LodgingCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Activity or Event Identifier:
AdministrativeDate

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	1	0

Transaction ID: D314851

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

27.00

101.59

128.59

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

Ms. Karen L. Thurman

Mailing Address

9067 SW 190th Avenue Rd

City

State

Zip Code

Dunnellon

FL

34432-2827

Purpose of Disbursement:
Auto TravelCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Activity or Event Identifier:
AdministrativeDate

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	1	0

Transaction ID: D314846

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.77

209.78

265.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

82.77

311.37

394.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 225 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Ms. Karen L. Thurman

Mailing Address

9067 SW 190th Avenue Rd

City	State	Zip Code
Dunnellon	FL	34432-2827

Purpose of Disbursement:
Staff ReimbursementCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D314898

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
314.50		1183.10		1497.60

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

Doverree Properties, LLC

Mailing Address

310 W Jefferson St Attn: Mr. Leonard Pepper

City	State	Zip Code
Tallahassee	FL	32301-1419

Purpose of Disbursement:
LodgingCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D314901

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

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

Ms. Karen L. Thurman

Mailing Address

9067 SW 190th Avenue Rd

City	State	Zip Code
Dunnellon	FL	34432-2827

Purpose of Disbursement:
Auto TravelCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 06 / 2010

Transaction ID: D314900

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.50		235.10		297.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
314.50		1183.10		1497.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 226 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:
Staff ReimbursementCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 09 / 2010

Transaction ID: D314905

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.13		335.30		424.43

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

Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:
Auto TravelCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 09 / 2010

Transaction ID: D314906

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.35		185.65		235.00

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

Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:
Travel/MealsCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 09 / 2010

Transaction ID: D314907

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.13		335.30		424.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 227 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
The Bricks

Mailing Address
1327 E 7th Ave

City State Zip Code
Tampa FL 33605-3607

Purpose of Disbursement:
Lunch Meeting

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: D314908

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.18

23.25

29.43

B. Full Name (Last, First, Middle Initial)
Eric Jotkoff

Mailing Address
2806 W Wallace Ave

City State Zip Code
Tampa FL 33611-4537

Purpose of Disbursement:
Staff Reimbursement

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: D314909

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

153.46

577.28

730.74

C. Full Name (Last, First, Middle Initial)
Eric Jotkoff

Mailing Address
2806 W Wallace Ave

City State Zip Code
Tampa FL 33611-4537

Purpose of Disbursement:
Auto Travel

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: D314914

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

149.99

564.25

714.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

153.46

577.28

730.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Target-Corporate

Mailing Address

1000 Nicollet Mall

City

State

Zip Code

Minneapolis

MN

55403-2542

Purpose of Disbursement:
Admin Offices SuppliesCategory/
Type

Activity or Event Identifier:

Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M M

/

D D

/

Y Y

Y Y

0 8

0 9

2 0

1 0

Transaction ID: D314916

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.22

4.58

5.80

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

WalMart Stores, Inc.

Mailing Address

702 SW 8th St

City

State

Zip Code

Bentonville

AR

72716-6209

Purpose of Disbursement:
Admin Office SuppliesCategory/
Type

Activity or Event Identifier:

Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M M

/

D D

/

Y Y

Y Y

0 8

0 9

2 0

1 0

Transaction ID: D314921

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.25

8.45

10.70

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

Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City

State

Zip Code

Tampa

FL

33629-4756

Purpose of Disbursement:
Staff ReimbursementCategory/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M M

/

D D

/

Y Y

Y Y

0 8

1 7

2 0

1 0

Transaction ID: D315501

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

57.68

216.98

274.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

57.68

216.98

274.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 229 / 232
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

A. Full Name (Last, First, Middle Initial)
Stephen Carville

Mailing Address

2401 W Morrison Ave 6610 Burden Ln

City State Zip Code
Tampa FL 33629-4756

Purpose of Disbursement:
Auto Travel

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 17 / 2010

Transaction ID: D315502

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

57.68

216.98

274.66

B. Full Name (Last, First, Middle Initial)
Kyle Schulberg

Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code
Miami FL 33176-1827

Purpose of Disbursement:
Staff Reimbursement

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 20 / 2010

Transaction ID: D315819

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

40.58

152.68

193.26

C. Full Name (Last, First, Middle Initial)
Kyle Schulberg

Mailing Address

9886 N Kendall Dr Apt H113

City State Zip Code
Miami FL 33176-1827

Purpose of Disbursement:
Auto Travel

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 20 / 2010

Transaction ID: D315820

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

40.58

152.68

193.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

40.58

152.68

193.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Kyle Schulberg

Mailing Address

9886 N Kendall Dr Apt H113

City	State	Zip Code
Miami	FL	33176-1827

Purpose of Disbursement:
Staff ReimbursementCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 20 / 2010

Transaction ID: D320103

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

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

AT&T Mobility

Mailing Address

PO Box 538695

City	State	Zip Code
Atlanta	GA	30353-8695

Purpose of Disbursement:
Admin Cell PhoneCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 20 / 2010

Transaction ID: D320107

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.20		94.80		120.00

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

Ms. Anne O Morgan

Mailing Address

741 W Keller St

City	State	Zip Code
Hernando	FL	34442-8810

Purpose of Disbursement:
Staff ReimbursementCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 20 / 2010

Transaction ID: D320304

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.15		546.05		691.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
170.35		640.85		811.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Ms. Anne O Morgan

Mailing Address

741 W Keller St

City

State

Zip Code

Hernando

FL

34442-8810

Purpose of Disbursement:

Auto Travel

Category/
Type

Activity or Event Identifier:

Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M M / D D / Y Y Y Y

0 8 / 2 0 / 2 0 1 0

Transaction ID: D320305

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

145.15

546.05

691.20

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

Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City

State

Zip Code

Jacksonville

FL

32207-4240

Purpose of Disbursement:

Staff Reimbursement

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M M / D D / Y Y Y Y

0 8 / 3 0 / 2 0 1 0

Transaction ID: D322248

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

123.15

463.30

586.45

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

AT&T

Mailing Address

PO Box 105262

City

State

Zip Code

Atlanta

GA

30348-5262

Purpose of Disbursement:

Admin Cell Phone

Category/
Type

Activity or Event Identifier:

Administrative

[MEMO ITEM]

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date

M M / D D / Y Y Y Y

0 8 / 3 0 / 2 0 1 0

Transaction ID: D322252

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

29.01

109.12

138.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

123.15

463.30

586.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC EXECUTIVE COMMITTEE OF FLORIDA

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

Scott Arceneaux

Mailing Address

1544 Lorimier Rd

City	State	Zip Code
Jacksonville	FL	32207-4240

Purpose of Disbursement:
Auto TravelCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D322249

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

86.35

324.85

411.20

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

USA Parking

Mailing Address

200 SW 1st Ave

City	State	Zip Code
Ft Lauderdale	FL	33301-1875

Purpose of Disbursement:
Auto TravelCategory/
TypeActivity or Event Identifier:
Administrative**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

831528.39

Date 08 / 30 / 2010

Transaction ID: D322250

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.80

29.32

37.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

18954.39

71982.00

90936.39