

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Bill Posey

ADDRESS (number and street)

P. O. Box 411486

Check if different than previously reported. (ACC)

Melbourne

FL

32941

2. FEC IDENTIFICATION NUMBER ▼

C C00444968

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Nancy H. Watkins

Signature of Treasurer Nancy H. Watkins

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Bill Posey

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	167988.00	1019708.43
(b) Total Contribution Refunds (from Line 20(d))	0.00	550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	167988.00	1019158.43
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	114759.76	646430.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	719.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	114759.76	645710.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	664411.47	
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).....	1907.98	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Bill Posey

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	101100.00	478842.00
(ii) Unitemized.....	2888.00	103883.13
(iii) TOTAL of contributions from individuals ▶	103988.00	582725.13
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	64000.00	436983.30
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	167988.00	1019708.43
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	719.75
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	76.56	559.62
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	168064.56	1020987.80

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	114759.76	646430.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	550.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	550.00
21. OTHER DISBURSEMENTS	0.00	62150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	114759.76	709130.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	611106.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	168064.56
25. SUBTOTAL (add Line 23 and Line 24).....	779171.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	114759.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	664411.47

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Fred L. Addison

Mailing Address 186 20th Avenue

City State Zip Code
Vero Beach FL 32962

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C-27-00Ad06

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Eric C. Anderson

Mailing Address 93 S. Jackson Street, #24599

City State Zip Code
Seattle WA 98104

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

Name of Employer Occupation
Intentional Software c.e.o.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : C-97-01vb01

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Eugene Atkinson

Mailing Address 2701 Ocean Drive, #A1

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
Atkinson Capital executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : C-137-01cQ02

Amount of Each Receipt this Period
100.00

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
William Becker

Mailing Address 582 Beachland Blvd., #300

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: Peace River Citrus Products Occupation: president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : C-246-002606

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Sallie M. Bernard

Mailing Address 281 Northstar Drive

City: Aspen State: CO Zip Code: 81611

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

Name of Employer: n/a Occupation: volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 22 / 2014

Transaction ID : C-260-01vc01

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Laurie Blakelock-Rodriguez

Mailing Address 675 34th Avenue, S.W.

City: Vero Beach State: FL Zip Code: 32968

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

Name of Employer: self-employed Occupation: realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 30 / 2014

Transaction ID : C-292-00eG03

Amount of Each Receipt this Period: 250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

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

Mailing Address 184 High Street

City Boston State MA Zip Code 02110

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

Name of Employer 3LP Occupation managing partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-296-01s302

Amount of Each Receipt this Period
1600.00

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

Mailing Address 184 High Street

City Boston State MA Zip Code 02110

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

Name of Employer 3LP Occupation managing partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-297-01s303

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Douglas Bolas

Mailing Address 5967 Broken Bow Lane

City Port Orange State FL Zip Code 32127

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

Name of Employer NATC Occupation architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : C-312-01w501

Amount of Each Receipt this Period
250.00

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

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

4250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Nancy T. Borton

Mailing Address 141 River View Drive

City Malabar State FL Zip Code 32950

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

Name of Employer Yellow Dog Cafe Occupation restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-338-01vk01

Amount of Each Receipt this Period
1000.00

* In-Kind-> food & beverage

B. Full Name (Last, First, Middle Initial)
Stuart J. Borton

Mailing Address 141 River View Drive

City Malabar State FL Zip Code 32950

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

Name of Employer Yellow Dog Cafe Occupation chef

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-339-01vj01

Amount of Each Receipt this Period
1000.00

* In-Kind-> food & beverage

C. Full Name (Last, First, Middle Initial)
Todd A. Brognano

Mailing Address P. O. Box 780874

City Sebastian State FL Zip Code 32978

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

Name of Employer Ameron Homes, Inc. Occupation contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-386-00QN06

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
George B. Browning

Mailing Address 8552 Sylvan Drive

City State Zip Code
Melbourne FL 32904

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

Name of Employer Occupation
self-employed pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-412-00RA0C

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Homoiselle Bujosa

Mailing Address 5719 Indian Trail

City State Zip Code
Houston TX 77057

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : C-442-01vP01

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dawn A. Butterfield

Mailing Address 2144 H.R. Lane

City State Zip Code
Cocoa FL 32926

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

Name of Employer Occupation
self-employed pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-464-01U502

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
John W. Childs

Mailing Address 165 Sago Palm Road

City Vero Beach State FL Zip Code 32963

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

Name of Employer J.W. Childs Associates, Inc. Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : C-549-01vo01

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
John W. Childs

Mailing Address 165 Sago Palm Road

City Vero Beach State FL Zip Code 32963

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

Name of Employer J.W. Childs Associates, Inc. Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : C-550-01vo02

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Marlene I. Childs

Mailing Address 165 Sago Palm Road

City Vero Beach State FL Zip Code 32963

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

Name of Employer n/a Occupation homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : C-551-01vp01

Amount of Each Receipt this Period
2600.00

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

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

7800.00

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

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

FOR LINE NUMBER: PAGE 11 OF 83
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Marlene I. Childs

Mailing Address 165 Sago Palm Road

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-552-01vp02

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Coy A. Clark

Mailing Address 330 N. Babcock Street, #103

City State Zip Code
Melbourne FL 32935

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

Name of Employer Occupation
Coy Clark Co. developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C-579-01F302

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gary G. Clifford

Mailing Address 2928 Longlake Drive

City State Zip Code
Titusville FL 32780

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

Name of Employer Occupation
Sun Electronic Systems, Inc. electrical engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : C-586-01wK01

Amount of Each Receipt this Period
1000.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Barbara Collner

Mailing Address 142 S. Twin Lakes Road

City State Zip Code
Cocoa FL 32926

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : C-603-00WE0B

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Pat Corrigan

Mailing Address P. O. Box 690068

City State Zip Code
Vero Beach FL 32969

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

Name of Employer Occupation
self-employed citrus farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C-644-004107

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
William G. Crotty

Mailing Address 5 Tomoka View Drive

City State Zip Code
Ormond Beach FL 32174

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

Name of Employer Occupation
self-employed attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : C-673-01w601

Amount of Each Receipt this Period
2600.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Ilene Davis

Mailing Address P. O. Box 237208

City State Zip Code
Cocoa FL 32923

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

Name of Employer Occupation
Royal Alliance Association financial advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 27 / 2014

Transaction ID : C-720-01Y203

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Patricia A. Deen

Mailing Address 4025 McCullough Road

City State Zip Code
Mims FL 32754

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 20 / 2014

Transaction ID : C-758-01Iz03

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Peter H. Diamandis

Mailing Address 3114 4th Street

City State Zip Code
Santa Monica CA 90405

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

Name of Employer Occupation
PHD Ventures aerospace

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : C-780-01vX01

Amount of Each Receipt this Period
2600.00

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Lisa A. Durgin

Mailing Address 1701 Bayshore Drive

City State Zip Code
Cocoa Beach FL 32931

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

Name of Employer Occupation
Edwards Realty, Inc. realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 20 / 2014

Transaction ID : C-865-002L08

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Norvin C. Evans

Mailing Address 330 Cocoa Avenue

City State Zip Code
Indialantic FL 32903

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-925-011Q02

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
F. James Fanto

Mailing Address 698 Monterey Drive

City State Zip Code
Satellite Beach FL 32937

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

Name of Employer Occupation
Fanto Group sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-937-01mc02

Amount of Each Receipt this Period
1000.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Jose Fanul

Mailing Address 1 N. Clematis Street, #200

City West Palm Beach	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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

Name of Employer Florida Crystals	Occupation executive
--------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : C-938-01vD01

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Henry A. Fischer

Mailing Address P. O. Box 780068

City Sebastian	State FL	Zip Code 32978
-------------------	-------------	-------------------

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

Name of Employer self-employed	Occupation dentist
-----------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-966-00270C

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Brian Z. France

Mailing Address P. O. Box 2875

City Daytona Beach	State FL	Zip Code 32120
-----------------------	-------------	-------------------

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

Name of Employer NASCAR	Occupation executive
----------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : C-996-01w801

Amount of Each Receipt this Period
2600.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
James C. France

Mailing Address P. O. Box 2875

City State Zip Code
Daytona Beach FL 32120

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

Name of Employer Occupation
International Speedway Corp. chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : C-998-01Wa04

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Sharon M. France

Mailing Address 1147 N. Halifax Avenue

City State Zip Code
Daytona Beach FL 32118

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : C-999-01WZ03

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Dudley E. Garner

Mailing Address 3110 W. Florida Avenue

City State Zip Code
Melbourne FL 32904

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1550.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2014

Transaction ID : C-1047-00Vk04

Amount of Each Receipt this Period
250.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Marc D. Gonsalves

Mailing Address 17550 O'hara Drive

City State Zip Code
Port Charlotte FL 33948

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

Name of Employer Occupation
Northrop Grumman security

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-1100-01vK01

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Daniel P. Griffin

Mailing Address 3740 Oakhill Drive

City State Zip Code
Titusville FL 32780

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

Name of Employer Occupation
Aero Electronics Systems vice-president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-1143-01wT01

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Andrew H. Gurtis

Mailing Address 9 Waterfront Court

City State Zip Code
Ormond Beach FL 32174

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

Name of Employer Occupation
Daytona International Speedway vice president-operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : C-1161-01vq01

Amount of Each Receipt this Period
250.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Richard J. Handler

Mailing Address 6400 Patrice Lane

City: Vero Beach State: FL Zip Code: 32967

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

Name of Employer: Vero Renal Associates Occupation: physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 08 / 13 / 2014

Transaction ID : C-1192-01B007

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Robert L. Hart

Mailing Address 252 S. State Road 415

City: New Smyrna Beach State: FL Zip Code: 32168

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

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 09 / 05 / 2014

Transaction ID : C-1215-01w901

Amount of Each Receipt this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
Michael G. Helton

Mailing Address 714 John Anderson Drive

City: Ormond Beach State: FL Zip Code: 32176

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

Name of Employer: NASCAR Occupation: president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 09 / 05 / 2014

Transaction ID : C-1242-01w701

Amount of Each Receipt this Period: 2600.00

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

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

4350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Paul J. Hirsch

Mailing Address 8212 Woodland Avenue

City Annandale State VA Zip Code 22003

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

Name of Employer Madison Government Affairs Occupation partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : C-1279-00Si05

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Sidney M. Hobbs

Mailing Address 585 River Moorings Drive

City Merritt Island State FL Zip Code 32953

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

Name of Employer Hobbs Pharmacy Occupation pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C-1282-008i06

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Sidney M. Hobbs

Mailing Address 585 River Moorings Drive

City Merritt Island State FL Zip Code 32953

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

Name of Employer Hobbs Pharmacy Occupation pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C-1283-008i07

Amount of Each Receipt this Period
500.00

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 20 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Thomas R. Howes

Mailing Address 3630 S. Tropical Trail

City Merritt Island State FL Zip Code 32952

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

Name of Employer self-employed Occupation pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-1337-01vL01

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Laura E. Jackson

Mailing Address 1316 Oak Forest Drive

City Ormond Beach State FL Zip Code 32174

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

Name of Employer International Speedway Corp. Occupation human resources

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : C-1386-01wA01

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Terry L. Kalna

Mailing Address 10 Coquina Stone Lane

City Ormond Beach State FL Zip Code 32174

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

Name of Employer International Speedway Corp. Occupation executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : C-1443-01wB01

Amount of Each Receipt this Period
 250.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Lesa D. Kennedy

Mailing Address 1 Daytona Blvd.

City Daytona Beach	State FL	Zip Code 32114
-----------------------	-------------	-------------------

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

Name of Employer International Speedway Corp.	Occupation executive
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : C-1472-01wC01

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Kompothecras

Mailing Address 6910 Point of Rock Road

City Sarasota	State FL	Zip Code 34242
------------------	-------------	-------------------

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

Name of Employer Komtek Media	Occupation marketing
----------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-1521-001F04

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Gary Kompothecras

Mailing Address 6910 Point of Rock Road

City Sarasota	State FL	Zip Code 34242
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FEC ID number of contributing federal political committee. **C**

Name of Employer Physicians Group, LLC	Occupation managing principal
---	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-1522-001G06

Amount of Each Receipt this Period
2600.00

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

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

7800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Tony P. Korvick

Mailing Address 9655 S. Dixie Highway, #208

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

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

Name of Employer Porter & Korvick, P.A.	Occupation attorney
--	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : C-1528-01In02

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mary Lang

Mailing Address 24 Centerpointe Drive

City La Palma	State CA	Zip Code 90623
------------------	-------------	-------------------

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

Name of Employer Beacon Day School	Occupation c.e.o.
---------------------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-1564-01vh01

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Mary Lang

Mailing Address 24 Centerpointe Drive

City La Palma	State CA	Zip Code 90623
------------------	-------------	-------------------

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

Name of Employer Beacon Day School	Occupation c.e.o.
---------------------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-1565-01vh02

Amount of Each Receipt this Period
2400.00

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
David W. Larson

Mailing Address 847 Tonkawa Road

City Orono State MN Zip Code 55356

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

Name of Employer Vibrant Technologies Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : C-1569-01vR01

Amount of Each Receipt this Period
 1800.00

B. Full Name (Last, First, Middle Initial)
Jennifer L. Larson

Mailing Address 847 Tonkawa Road

City Orono State MN Zip Code 55356

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

Name of Employer Vibrant Technologies Occupation c.e.o.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : C-1571-01s102

Amount of Each Receipt this Period
 1600.00

C. Full Name (Last, First, Middle Initial)
Jennifer L. Larson

Mailing Address 847 Tonkawa Road

City Orono State MN Zip Code 55356

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

Name of Employer Vibrant Technologies Occupation c.e.o.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : C-1572-01s103

Amount of Each Receipt this Period
 2600.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Chris Lewicki

Mailing Address 15941 S.E. 41st Place

City State Zip Code
Bellevue WA 98006

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

Name of Employer Occupation
Planetary Resources president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-1606-01vY01

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James L. Morris

Mailing Address 1644 Town Park Drive

City State Zip Code
Port Orange FL 32129

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

Name of Employer Occupation
International Speedway Corp. executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : C-1915-01vI01

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Greg Motto

Mailing Address 30 Sunrise Avenue

City State Zip Code
Ormond Beach FL 32176

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

Name of Employer Occupation
International Speedway Corp. controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : C-1927-01vm01

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Stephan F. Newhouse

Mailing Address 600 Coconut Palm Road

City State Zip Code
Vero Beach FL 32963

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 21 / 2014

Transaction ID : C-1994-01m902

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Larry W. Nissen

Mailing Address 2424 Willowbrook Road

City State Zip Code
Merritt Island FL 32952

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

Name of Employer Occupation
self-employed dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 27 / 2014

Transaction ID : C-2006-00HT06

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Newton P. Porter

Mailing Address 9655 S. Dixie Highway, #208

City State Zip Code
Miami FL 33156

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

Name of Employer Occupation
Porter & Korvick, P.A. attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : C-2169-01Im02

Amount of Each Receipt this Period
2600.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Jerry H. Sansom

Mailing Address P. O. Box 98

City State Zip Code
Cocoa FL 32923

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

Name of Employer Occupation
self-employed govt. relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : C-2348-000L08

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
John R. Saunders

Mailing Address 2246 John Anderson Drive

City State Zip Code
Ormond Beach FL 32176

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

Name of Employer Occupation
International Speedway Corp. executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : C-2356-01wD01

Amount of Each Receipt this Period
1573.00

C. Full Name (Last, First, Middle Initial)
John R. Saunders

Mailing Address 2246 John Anderson Drive

City State Zip Code
Ormond Beach FL 32176

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

Name of Employer Occupation
International Speedway Corp. executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : C-2357-01wD02

Amount of Each Receipt this Period
1027.00

* In-Kind-> catering/facility rental

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Robert P. Scaringe

Mailing Address 200 Yelloe Place

City State Zip Code
Rockledge FL 32955

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

Name of Employer Occupation
Mainstream Engineering Corp. president/c.e.o.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-2370-00P707

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Barry Segal

Mailing Address 776 Mountain Blvd., #202

City State Zip Code
Watchung NJ 07069

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

Name of Employer Occupation
Focus Autism president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : C-2419-01uq02

Amount of Each Receipt this Period
1600.00

C. Full Name (Last, First, Middle Initial)
Dolly Segal

Mailing Address 776 Mountain Blvd., #202

City State Zip Code
Watchung NJ 07069

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

Name of Employer Occupation
n/a retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : C-2420-01vQ01

Amount of Each Receipt this Period
2600.00

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

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

4700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Robert W. Sopocy

Mailing Address 636 Orange Court

City State Zip Code
Rockledge FL 32955

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

Name of Employer Occupation
Family Drug Mart owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : C-2526-01U802

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Val M. Steele

Mailing Address 325 5th Avenue, #8

City State Zip Code
Indialantic FL 32903

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

Name of Employer Occupation
The Steele Company real estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : C-2572-01d602

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Janie Stidham

Mailing Address P. O. Box 570

City State Zip Code
Roseland FL 32957

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : C-2597-01vd01

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 83
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Michael M. Storey

Mailing Address 4370 Stillwater Drive

City Merritt Island	State FL	Zip Code 32952
------------------------	-------------	-------------------

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

Name of Employer Fidelity Bank	Occupation banker
-----------------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-2615-00Q908

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Theresa W. Tolle

Mailing Address 5797 Treasure Lane

City Grant	State FL	Zip Code 32949
---------------	-------------	-------------------

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

Name of Employer Bay Street Pharmacy, Inc.	Occupation pharmacist
---	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-2721-01UA02

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Thomas E. Wasdin

Mailing Address 29 Riverside Drive, #602

City Cocoa	State FL	Zip Code 32922
---------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 20 / 2014

Transaction ID : C-2837-00AL05

Amount of Each Receipt this Period
1000.00

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

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

4600.00

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

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

FOR LINE NUMBER: PAGE 30 OF 83
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Donald F. Welk

Mailing Address 3485 Raney Road

City Titusville State FL Zip Code 32780

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

Name of Employer Sporting Clays Magazine Occupation owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : C-2864-01uy01

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
James A. Wright

Mailing Address 150 E. Robinson Street, #2150

City Orlando State FL Zip Code 32801

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

Name of Employer self-employed Occupation pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-2945-01ws01

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Carl M. Zippi

Mailing Address 709 Oak Park Drive

City Melbourne State FL Zip Code 32940

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

Name of Employer Saver Drug Mart Occupation pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-2977-01UB02

Amount of Each Receipt this Period
 250.00

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

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

3350.00

101100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-32-01wV01

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Amer. Academy of Dermatology Assoc. PAC

Mailing Address 1445 New York Avenue, N.W., #800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-58-01ZF07

Amount of Each Receipt this Period
4000.00

C. Full Name (Last, First, Middle Initial)
American Academy of Neurology

Mailing Address 401 C Street, N.E.

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : C-59-01wG01

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
American Airlines PAC

Mailing Address 1101 17th Street, N.W., #600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00107300**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-60-00VW02

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Financial Services Assoc. PAC

Mailing Address 919 18th Street, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00038604**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : C-81-01GT09

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
American Financial Services Assoc. PAC

Mailing Address 919 18th Street, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00038604**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : C-82-01GT0A

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
American Institute of CPA's PAC

Mailing Address 220 Leigh Farm Road

City State Zip Code
Durham NC 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : C-84-00iR04

Amount of Each Receipt this Period
1000.00

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

Mailing Address 25 Massachusetts Avenue, N.W., #60

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : C-85-00Jn06

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Asian American Hotel Owners Assn. PAC

Mailing Address 228 S. Washington Street, #115

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00336743

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : C-129-01Kz03

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
The Boeing Company PAC

Mailing Address 1200 Wilson Blvd.

City: Arlington State: VA Zip Code: 22209

FEC ID number of contributing federal political committee: **C C00142711**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 08 / 15 / 2014

Transaction ID : C-310-00Uv09

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
CME Group, Inc. PAC

Mailing Address 20 S. Wacker Drive

City: Chicago State: IL Zip Code: 60606

FEC ID number of contributing federal political committee: **C C00076299**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 11 / 2014

Transaction ID : C-468-01V002

Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
Comcast Corporation & NBCUniversal PAC

Mailing Address 1701 J.F.K. Blvd., 49th Floor

City: Philadelphia State: PA Zip Code: 19103

FEC ID number of contributing federal political committee: **C C00248716**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 08 / 13 / 2014

Transaction ID : C-611-00XB0A

Amount of Each Receipt this Period: 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Davita Healthcare Partners, Inc. PAC

Mailing Address 32275 32nd Avenue, S.

City State Zip Code
Federal Way WA 98001

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : C-731-01vN01

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC

Mailing Address 550 S. Tyron Street

City State Zip Code
Charlotte NC 28202

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-853-011a03

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Family Research Council Action PAC

Mailing Address 801 G Street, N.W.

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00452383

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : C-935-01vO01

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
General Electric Political Action Comm.

Mailing Address 1299 Pennsylvania Ave., N.W., #900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : C-1071-00K40A

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Halliburton Company PAC

Mailing Address 801 17th Street, N.W., 10th Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 21 / 2014

Transaction ID : C-1178-01vZ01

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ind. Ins. Agents & Brokers of America PAC

Mailing Address 20 F Street, N.W., #610

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : C-1367-004z0D

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Liberty Mutual Insurance Company PAC

Mailing Address 175 Berkeley Street

City State Zip Code
Boston MA 02117

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : C-1617-00W905

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Liberty Mutual Insurance Company PAC

Mailing Address 175 Berkeley Street

City State Zip Code
Boston MA 02117

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : C-1618-00W906

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Corp. Employees' PAC

Mailing Address 2121 Crystal Drive, #100

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2014

Transaction ID : C-1651-00Th0L

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Lowe's Companies, Inc. PAC

Mailing Address 1000 Lowe's Blvd.

City Mooresville State NC Zip Code 28117

FEC ID number of contributing federal political committee. **C** C00251751

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-1674-01HJ04

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Marathon Petroleum Corp. Emp. PAC

Mailing Address P. O. Box 75000 MC2250

City Detroit State MI Zip Code 48275

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : C-1729-01Iq02

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : C-1948-00W609

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : C-1949-00W60A

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-1950-00W60B

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Avenue, N.W.

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-1951-00W60C

Amount of Each Receipt this Period
 2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC

Mailing Address 430 N. Michigan Avenue

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : C-1956-00G70I

Amount of Each Receipt this Period
4000.00

B. Full Name (Last, First, Middle Initial)
Natl. Assn. of Ins. & Fin. Advisors PAC

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : C-1962-00SG0E

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
National Beer Wholesalers Assn. PAC

Mailing Address 1101 King Street, #600

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : C-1966-00XR07

Amount of Each Receipt this Period
2500.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. National Ready Mixed Concrete Assn. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 900 Spring Street

City Silver Spring State MD Zip Code 20910

FEC ID number of contributing federal political committee. **C C00114025**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-1972-01vn01

Amount of Each Receipt this Period
 2000.00

B. NextEra Energy, Inc. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 700 Universe Blvd.

City Juno Beach State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : C-1999-01Ue04

Amount of Each Receipt this Period
 1000.00

C. Regions Financial Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1015 15th Street, N.W., #920

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : C-2249-01GP07

Amount of Each Receipt this Period
 2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Scalise for Congress
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 23219
 City Jefferson State LA Zip Code 70183
 FEC ID number of contributing federal political committee. **C C00394957**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : C-2367-01w001
 Amount of Each Receipt this Period
 2000.00

B. Title Industry PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1828 L Street, N.W., #705
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C C00012914**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : C-2715-00WS04
 Amount of Each Receipt this Period
 1000.00

C. UBS America Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Atlantic Street
 City Stamford State CT Zip Code 06901
 FEC ID number of contributing federal political committee. **C C00012245**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : C-2753-011w02
 Amount of Each Receipt this Period
 5000.00

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

8000.00
 64000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 83
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Bank of Tampa

Mailing Address P. O. Box 1

City Tampa State FL Zip Code 33601

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
559.62

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : C-199-004y10

Amount of Each Receipt this Period
36.40

B. Full Name (Last, First, Middle Initial)
Bank of Tampa

Mailing Address P. O. Box 1

City Tampa State FL Zip Code 33601

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
559.62

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : C-200-004y11

Amount of Each Receipt this Period
40.16

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

76.56

76.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address P. O. Box 6463		Amount of Each Disbursement this Period 680.82
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement telephone	Transaction ID : D46-00Hr1E
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address P. O. Box 6463		Amount of Each Disbursement this Period 388.11
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement telephone	Transaction ID : D47-00Hr1F
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Baymeadows Commercial, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 1676 W. Hibiscus Blvd., #102		Amount of Each Disbursement this Period 998.52
City Melbourne	State FL	
Zip Code 32901	Purpose of Disbursement office rent	Transaction ID : D83-01TQ09
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2067.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Baymeadows Commercial, LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 1676 W. Hibiscus Blvd., #102			Amount of Each Disbursement this Period 998.52	
City Melbourne	State FL	Zip Code 32901	Transaction ID : D84-01TQ0A	
Purpose of Disbursement office rent		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Baymeadows Commercial, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014	
Mailing Address 1676 W. Hibiscus Blvd., #102			Amount of Each Disbursement this Period 18.75	
City Melbourne	State FL	Zip Code 32901	Transaction ID : D85-01TQ0B	
Purpose of Disbursement utilities		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. Baymeadows Commercial, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014	
Mailing Address 1676 W. Hibiscus Blvd., #102			Amount of Each Disbursement this Period 998.52	
City Melbourne	State FL	Zip Code 32901	Transaction ID : D86-01TQ0C	
Purpose of Disbursement office rent		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	2015.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Greg Bennett		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 108 Snead Road, #G		Amount of Each Disbursement this Period 375.00 Transaction ID : D87-00U304
City Indian Harbour Beach	State FL	
Zip Code 32937	Purpose of Disbursement event entertainment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Berry Signs, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1740 S. Huntington Lane		Amount of Each Disbursement this Period 10096.50 Transaction ID : D91-000F0J
City Rockledge	State FL	
Zip Code 32955	Purpose of Disbursement campaign signs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Berry Signs, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1740 S. Huntington Lane		Amount of Each Disbursement this Period 7420.00 Transaction ID : D92-000F0K
City Rockledge	State FL	
Zip Code 32955	Purpose of Disbursement campaign signs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	17891.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Berry Signs, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 1740 S. Huntington Lane		Amount of Each Disbursement this Period 1378.00
City Rockledge	State FL	
Zip Code 32955	Purpose of Disbursement bumper stickers	Transaction ID : D93-000F0L
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nancy T. Borton		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 141 River View Drive		Amount of Each Disbursement this Period 1000.00
City Malabar	State FL	
Zip Code 32950	Purpose of Disbursement * In-Kind->food & beverage	Transaction ID : D107-01vk01
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Stuart J. Borton		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 141 River View Drive		Amount of Each Disbursement this Period 1000.00
City Malabar	State FL	
Zip Code 32950	Purpose of Disbursement * In-Kind->food & beverage	Transaction ID : D108-01vj01
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3378.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Brevard County Republican Exec. Comm.			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014		
Mailing Address P. O. Box 410153			Amount of Each Disbursement this Period 200.00		
City Melbourne	State FL	Zip Code 32941	Transaction ID : D117-00Nv0B		
Purpose of Disbursement booth/advertisement		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Bright House Networks			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014		
Mailing Address P. O. Box 30574			Amount of Each Disbursement this Period 234.48		
City Tampa	State FL	Zip Code 33630	Transaction ID : D125-00Gk0F		
Purpose of Disbursement internet access		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Bright House Networks			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014		
Mailing Address P. O. Box 30574			Amount of Each Disbursement this Period 89.24		
City Tampa	State FL	Zip Code 33630	Transaction ID : D126-00Gk0G		
Purpose of Disbursement internet access		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	523.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 300 First Street, S.E.			Amount of Each Disbursement this Period 64.76
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement food & beverage		Category/ Type	Transaction ID : D186-00WL1Y
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 300 First Street, S.E.			Amount of Each Disbursement this Period 260.73
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement meals/membership dues		Category/ Type	Transaction ID : D187-00WL1Z
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Card Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address P. O. Box 13337			Amount of Each Disbursement this Period 1273.15
City Philadelphia	State PA	Zip Code 19110	
Purpose of Disbursement see memo entries		Category/ Type	Transaction ID : D194-01qf04
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional)	1598.64
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1350 Potomac Avenue, S.E.		Amount of Each Disbursement this Period 23.35
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement food & beverage	Transaction ID : D2-00mn0L
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. Target		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1000 Nicollet Mall		Amount of Each Disbursement this Period 5.50
City Minneapolis	State MN	
Zip Code 55403	Purpose of Disbursement food & beverage	Transaction ID : D5-01DZ0A
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 200.00
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D6-00Kv4C
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 211.10
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D7-00Kv4D
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 318.10
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D8-00Kv4E
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 211.10
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D9-00Kv4F
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 208.00
City Pittsburgh	State PA Zip Code 15220	
Purpose of Disbursement transportation	Candidate Name	Transaction ID : D10-00Kv4G
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) B. Card Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address P. O. Box 13337		Amount of Each Disbursement this Period 594.40
City Philadelphia	State PA Zip Code 19110	
Purpose of Disbursement see memo entries	Candidate Name	Transaction ID : D195-01qf05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 114.10
City Pittsburgh	State PA Zip Code 15220	
Purpose of Disbursement transportation	Candidate Name	Transaction ID : D3-00Kv4H
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

SUBTOTAL of Disbursements This Page (optional).....	594.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 148.10
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D4-00Kv4I
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 98.10
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D5-00Kv4J
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 7 Park Center		Amount of Each Disbursement this Period 114.10
City Pittsburgh	State PA	
Zip Code 15220	Purpose of Disbursement transportation	Transaction ID : D6-00Kv4K
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Kenny Cohen		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address P. O. Box 924		Amount of Each Disbursement this Period 500.00 Transaction ID : D224-01wL01
City Winter Park	State FL	
Zip Code 32790	Purpose of Disbursement event entertainment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) B. Data Targeting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 6211 N.W. 132nd Street		Amount of Each Disbursement this Period 3481.45 Transaction ID : D300-00GI1F
City Gainesville	State FL	
Zip Code 32653	Purpose of Disbursement direct mail services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) c. Data Targeting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 6211 N.W. 132nd Street		Amount of Each Disbursement this Period 10000.00 Transaction ID : D301-00GI1G
City Gainesville	State FL	
Zip Code 32653	Purpose of Disbursement management consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	13981.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial)
A. Data Targeting, Inc.

Mailing Address 6211 N.W. 132nd Street

City Gainesville State FL Zip Code 32653

Purpose of Disbursement printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2014

Amount of Each Disbursement this Period: 201.57

Transaction ID : D302-00GI1H

Full Name (Last, First, Middle Initial)
B. Data Targeting, Inc.

Mailing Address 6211 N.W. 132nd Street

City Gainesville State FL Zip Code 32653

Purpose of Disbursement direct mail services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2014

Amount of Each Disbursement this Period: 2975.00

Transaction ID : D303-00GI1I

Full Name (Last, First, Middle Initial)
c. Data Targeting, Inc.

Mailing Address 6211 N.W. 132nd Street

City Gainesville State FL Zip Code 32653

Purpose of Disbursement direct mail services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2014

Amount of Each Disbursement this Period: 1196.10

Transaction ID : D304-00GI1J

SUBTOTAL of Disbursements This Page (optional) 4372.67

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Data Targeting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 6211 N.W. 132nd Street		Amount of Each Disbursement this Period 3474.59
City Gainesville	State FL	
Zip Code 32653	Purpose of Disbursement direct mail services	Transaction ID : D305-00GI1K
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Data Targeting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 6211 N.W. 132nd Street		Amount of Each Disbursement this Period 1976.30
City Gainesville	State FL	
Zip Code 32653	Purpose of Disbursement direct mail services	Transaction ID : D306-00GI1L
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Data Targeting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 6211 N.W. 132nd Street		Amount of Each Disbursement this Period 5246.56
City Gainesville	State FL	
Zip Code 32653	Purpose of Disbursement survey	Transaction ID : D307-00GI1M
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10697.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Data Targeting, Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014		
Mailing Address 6211 N.W. 132nd Street			Amount of Each Disbursement this Period 10000.00		
City Gainesville	State FL	Zip Code 32653	Transaction ID : D308-00GI1N		
Purpose of Disbursement management consulting		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Earth Awareness of Brevard, Inc.			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014		
Mailing Address 1729 Cogswell Street			Amount of Each Disbursement this Period 250.00		
City Rockledge	State FL	Zip Code 32955	Transaction ID : D329-01XA03		
Purpose of Disbursement candidate booth		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Florida Power & Light			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014		
Mailing Address General Mail Facility			Amount of Each Disbursement this Period 331.64		
City Miami	State FL	Zip Code 33188	Transaction ID : D360-00H50h		
Purpose of Disbursement utilities		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	10581.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Florida Power & Light		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address General Mail Facility		Amount of Each Disbursement this Period 238.19 Transaction ID : D361-00H50i
City Miami	State FL	
Zip Code 33188	Purpose of Disbursement utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Amber Steigerwald Frisco		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 3161 Brentwood Lane		Amount of Each Disbursement this Period 2630.67 Transaction ID : D396-01I80m
City Melbourne	State FL	
Zip Code 32934	Purpose of Disbursement salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Amber Steigerwald Frisco		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 3161 Brentwood Lane		Amount of Each Disbursement this Period 6026.15 Transaction ID : D397-01I80n
City Melbourne	State FL	
Zip Code 32934	Purpose of Disbursement salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8895.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Amber Steigerwald Frisco			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 3161 Brentwood Lane			Amount of Each Disbursement this Period 2630.67	
City Melbourne	State FL	Zip Code 32934	Transaction ID : D398-0180o	
Purpose of Disbursement salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Patrick Gavin			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014	
Mailing Address 3210 Parkplace Court			Amount of Each Disbursement this Period 180.00	
City Melbourne	State FL	Zip Code 32934	Transaction ID : D435-00GJ0y	
Purpose of Disbursement office equipment		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Patrick Gavin			Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 3210 Parkplace Court			Amount of Each Disbursement this Period 461.75	
City Melbourne	State FL	Zip Code 32934	Transaction ID : D436-00GJ0z	
Purpose of Disbursement salary		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3272.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Patrick Gavin			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014		
Mailing Address 3210 Parkplace Court			Amount of Each Disbursement this Period 552.07		
City Melbourne	State FL	Zip Code 32934	Transaction ID : D437-00GJ10		
Purpose of Disbursement see memo entries		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Patrick Gavin			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014		
Mailing Address 3210 Parkplace Court			Amount of Each Disbursement this Period 425.72		
City Melbourne	State FL	Zip Code 32934	Transaction ID : D1-00GJ12		
Purpose of Disbursement mileage		Category/ Type	[MEMO ITEM]		
Candidate Name		Memo			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. The Home Depot			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014		
Mailing Address 5100 N. Wickham Road			Amount of Each Disbursement this Period 126.35		
City Melbourne	State FL	Zip Code 32940	Transaction ID : D2-00UA0J		
Purpose of Disbursement sign supplies		Category/ Type	[MEMO ITEM]		
Candidate Name		Memo			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	552.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Patrick Gavin		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3210 Parkplace Court		Amount of Each Disbursement this Period 461.75 Transaction ID : D438-00GJ11
City Melbourne	State FL	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 200 Park Avenue, #306		Amount of Each Disbursement this Period 95.49 Transaction ID : D487-00Hh2P
City Falls Church	State VA	
Purpose of Disbursement parking/delivery		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Hammond & Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 200 Park Avenue, #306		Amount of Each Disbursement this Period 2125.00 Transaction ID : D488-00Hh2Q
City Falls Church	State VA	
Purpose of Disbursement fundraising consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2682.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Hammond & Associates			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 200 Park Avenue, #306			Amount of Each Disbursement this Period 280.82	
City Falls Church	State VA	Zip Code 22046	Transaction ID : D489-00Hh2R	
Purpose of Disbursement catering/delivery		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Hammond & Associates			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 200 Park Avenue, #306			Amount of Each Disbursement this Period 2125.00	
City Falls Church	State VA	Zip Code 22046	Transaction ID : D490-00Hh2S	
Purpose of Disbursement fundraising consulting		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Mail Stop & More			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 6300 N. Wickham Road, #130			Amount of Each Disbursement this Period 33.41	
City Melbourne	State FL	Zip Code 32940	Transaction ID : D605-01Kh0u	
Purpose of Disbursement delivery		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2439.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Mail Stop & More

Full Name (Last, First, Middle Initial)
Mailing Address 6300 N. Wickham Road, #130

City Melbourne State FL Zip Code 32940

Purpose of Disbursement postage/delivery

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 19 / 2014

Amount of Each Disbursement this Period: 344.92

Transaction ID : D606-01Kh0v

B. Bill Posey

Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 360877

City Melbourne State FL Zip Code 32936

Purpose of Disbursement mileage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 26 / 2014

Amount of Each Disbursement this Period: 95.20

Transaction ID : D750-00011o

C. Republican Liberty Caucus of Central E. FL

Full Name (Last, First, Middle Initial)
Mailing Address P. O. Box 361711

City Melbourne State FL Zip Code 32936

Purpose of Disbursement dinner ticket

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 22 / 2014

Amount of Each Disbursement this Period: 65.00

Transaction ID : D793-01Kf05

SUBTOTAL of Disbursements This Page (optional) 505.12

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Republican Women's Federal Forum			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address P. O. Box 3571			Amount of Each Disbursement this Period 32.00 Transaction ID : D810-00Yi0R
City Merrifield	State VA	Zip Code 22116	
Purpose of Disbursement luncheon tickets		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Matthew Russell			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 320 Roosevelt Avenue			Amount of Each Disbursement this Period 211.73 Transaction ID : D825-00U206
City Satellite Beach	State FL	Zip Code 32937	
Purpose of Disbursement see memo entries		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Lowe's Home Centers, Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 1000 Lowes Blvd.			Amount of Each Disbursement this Period 77.11 Transaction ID : D2-00UE07
City Mooresville	State NC	Zip Code 28117	
Purpose of Disbursement sign supplies		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	243.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Matthew Russell		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 320 Roosevelt Avenue		Amount of Each Disbursement this Period 128.27
City Satellite Beach	State FL	
Zip Code 32937	Purpose of Disbursement mileage	Transaction ID : D3-00U207
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Memo
State: District:		

Full Name (Last, First, Middle Initial) B. John R. Saunders		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2246 John Anderson Drive		Amount of Each Disbursement this Period 1027.00
City Ormond Beach	State FL	
Zip Code 32176	Purpose of Disbursement * In-Kind->catering/facility rental	Transaction ID : D836-01wD01
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. John Solter		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 19 South Court		Amount of Each Disbursement this Period 80.70
City Indialantic	State FL	
Zip Code 32903	Purpose of Disbursement mileage	Transaction ID : D851-01ur01
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1107.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 83
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. John Solter		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 19 South Court		Amount of Each Disbursement this Period 158.76 Transaction ID : D852-01ur02
City Indianapolis	State FL	
Zip Code 32903	Purpose of Disbursement mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 1421.26 Transaction ID : D1194-00Uq0w
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 3016.45 Transaction ID : D1195-00Uq0x
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement payroll taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	4596.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address P. O. Box 105083		Amount of Each Disbursement this Period 1533.13
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement payroll taxes	Transaction ID : D1196-00Uq0y
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Visa		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address P. O. Box 30131		Amount of Each Disbursement this Period 1522.62
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement see memo entries	Transaction ID : D1298-00HS4I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 5100 N. Wickham Road		Amount of Each Disbursement this Period 14.81
City Melbourne	State FL	
Zip Code 32940	Purpose of Disbursement sign supplies	Transaction ID : D2-00UA0I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3055.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Orange County Rep. Executive Committee		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1320 N. Semoran, #207		Amount of Each Disbursement this Period 1050.00
City Orlando	State FL Zip Code 32807	
Purpose of Disbursement dinner tickets	Candidate Name	Transaction ID : D4-00Wj02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 680 N. Apollo Blvd.		Amount of Each Disbursement this Period 147.00
City Melbourne	State FL Zip Code 32935	
Purpose of Disbursement postage	Candidate Name	Transaction ID : D6-004L5r
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) c. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 680 N. Apollo Blvd.		Amount of Each Disbursement this Period 6.00
City Melbourne	State FL Zip Code 32935	
Purpose of Disbursement postage	Candidate Name	Transaction ID : D7-004L5s
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 680 N. Apollo Blvd.		Amount of Each Disbursement this Period 98.00
City Melbourne	State FL	
Zip Code 32935	Purpose of Disbursement postage	Transaction ID : D8-004L5t
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. Wal-Mart Stores, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 702 S.W. 8th Street		Amount of Each Disbursement this Period 118.30
City Bentonville	State AR	
Zip Code 72716	Purpose of Disbursement event supplies	Transaction ID : D9-00Kw0e
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. Visa		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address P. O. Box 30131		Amount of Each Disbursement this Period 1238.42
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement see memo entries	Transaction ID : D1299-00HS4J
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1238.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address P. O. Box 105262		Amount of Each Disbursement this Period 127.18
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement telephone	Transaction ID : D1-00AS1f
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address P. O. Box 105262		Amount of Each Disbursement this Period 148.39
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement telephone	Transaction ID : D2-00AS1g
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. Clickfree		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 30 W. Beaver Creek Road, #115 Ontario, Canada L4B 3K1		Amount of Each Disbursement this Period 248.44
City Richmond Hill	State Zip Code	
Purpose of Disbursement office equipment	Category/ Type	Transaction ID : D5-01w401
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. GFS Marketplace		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 2655 W. New Haven Avenue		Amount of Each Disbursement this Period 115.80
City Melbourne	State FL Zip Code 32904	
Purpose of Disbursement food & beverage	Candidate Name	Transaction ID : D7-01ph02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 6600 N. Military Trail		Amount of Each Disbursement this Period 63.75
City Boca Raton	State FL Zip Code 33496	
Purpose of Disbursement office supplies	Candidate Name	Transaction ID : D10-00lw1n
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) C. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 680 N. Apollo Blvd.		Amount of Each Disbursement this Period 98.00
City Melbourne	State FL Zip Code 32935	
Purpose of Disbursement postage	Candidate Name	Transaction ID : D11-004L5v
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial)
A. U.S. Space Walk of Fame Foundation

Mailing Address 4 Main Street

City Titusville State FL Zip Code 32796

Purpose of Disbursement donor gifts

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 15 / 2014

Amount of Each Disbursement this Period
317.95

Transaction ID : D12-01w201

[MEMO ITEM]
Credit Card Item

Full Name (Last, First, Middle Initial)
B. Visa

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement see memo entries

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 09 / 2014

Amount of Each Disbursement this Period
2849.74

Transaction ID : D1300-00HS4K

Full Name (Last, First, Middle Initial)
c. Carmine's

Mailing Address 425 7th Street, N.W.

City Washington State DC Zip Code 20004

Purpose of Disbursement catering

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 18 / 2014

Amount of Each Disbursement this Period
390.90

Transaction ID : D2-01vy01

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional)..... 2849.74

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Carmine's		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 425 7th Street, N.W.		Amount of Each Disbursement this Period 1240.06
City Washington State DC Zip Code 20004	Purpose of Disbursement catering	
Candidate Name	Category/Type	Transaction ID : D3-01vy02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) B. Florida Today		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address P. O. Box 419000		Amount of Each Disbursement this Period 144.01
City Melbourne State FL Zip Code 32941	Purpose of Disbursement subscription	
Candidate Name	Category/Type	Transaction ID : D5-00Um04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) c. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1350 Potomac Avenue, S.E.		Amount of Each Disbursement this Period 21.28
City Washington State DC Zip Code 20003	Purpose of Disbursement food & beverage	
Candidate Name	Category/Type	Transaction ID : D6-00mn0M
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] Credit Card Item

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Ted's Bulletin		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 505 8th Street, S.E.		Amount of Each Disbursement this Period 103.68
City Washington State DC Zip Code 20003	Purpose of Disbursement food & beverage	
Candidate Name	Category/Type	Transaction ID : D9-011h02
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) B. Trattoria Alberto		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 506 8th Street, S.E.		Amount of Each Disbursement this Period 483.85
City Washington State DC Zip Code 20003	Purpose of Disbursement food & beverage	
Candidate Name	Category/Type	Transaction ID : D10-00mY07
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) C. U.S. House of Representatives		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address Longworth Building		Amount of Each Disbursement this Period 176.40
City Washington State DC Zip Code 20515	Purpose of Disbursement gifts	
Candidate Name	Category/Type	Transaction ID : D11-00Wb15
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM] Credit Card Item

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. U.S. House of Representatives		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address Longworth Building		Amount of Each Disbursement this Period 1726.28
City Washington	State DC Zip Code 20515	
Purpose of Disbursement gifts	Candidate Name	Transaction ID : D12-00Wb16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) B. U.S. House of Representatives		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address Longworth Building		Amount of Each Disbursement this Period 126.90
City Washington	State DC Zip Code 20515	
Purpose of Disbursement gifts	Candidate Name	Transaction ID : D13-00Wb17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] Credit Card Item

Full Name (Last, First, Middle Initial) c. Visa		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address P. O. Box 30131		Amount of Each Disbursement this Period 1726.28
City Tampa	State FL Zip Code 33630	
Purpose of Disbursement see memo entries	Candidate Name	Transaction ID : D1301-00HS4L
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1726.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 7601 Penn Avenue, S.		Amount of Each Disbursement this Period 392.18
City Richfield	State MN	
Zip Code 55423	Purpose of Disbursement software	Transaction ID : D1-00N609
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 6600 N. Military Trail		Amount of Each Disbursement this Period 177.00
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement office equipment	Transaction ID : D10-00lw11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 6600 N. Military Trail		Amount of Each Disbursement this Period 125.08
City Boca Raton	State FL	
Zip Code 33496	Purpose of Disbursement printing	Transaction ID : D11-00lw1m
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 83			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 159.79
City Framingham	State MA	
Zip Code 01702	Purpose of Disbursement office supplies	[MEMO ITEM] Credit Card Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 64.62
City Framingham	State MA	
Zip Code 01702	Purpose of Disbursement office supplies	[MEMO ITEM] Credit Card Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 15.35
City Framingham	State MA	
Zip Code 01702	Purpose of Disbursement food & beverage	[MEMO ITEM] Credit Card Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 83			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 169.07
City Framingham	State MA	
Zip Code 01702		[MEMO ITEM] Credit Card Item
Purpose of Disbursement printing	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 500 Staples Drive		Amount of Each Disbursement this Period 31.79
City Framingham	State MA	
Zip Code 01702		[MEMO ITEM] Credit Card Item
Purpose of Disbursement office supplies	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. The Palm Cafe		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 30 Tradewinds Drive		Amount of Each Disbursement this Period 383.00
City Indian Harbour Beach	State FL	
Zip Code 32937		[MEMO ITEM] Credit Card Item
Purpose of Disbursement food & beverage	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 680 N. Apollo Blvd.		Amount of Each Disbursement this Period 2265.52
City Melbourne	State FL	
Zip Code 32935	Purpose of Disbursement postage	Transaction ID : D23-004L5u
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) B. Wal-Mart Stores, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 702 S.W. 8th Street		Amount of Each Disbursement this Period 33.29
City Bentonville	State AR	
Zip Code 72716	Purpose of Disbursement food & beverage	Transaction ID : D24-00Kw0f
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) c. Kelly M. Walker		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 250 St. Lucie Lane, #6		Amount of Each Disbursement this Period 2265.52
City Cocoa Beach	State FL	
Zip Code 32931	Purpose of Disbursement salary	Transaction ID : D1324-01vg01
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2265.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Kelly M. Walker		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 250 St. Lucie Lane, #6		Amount of Each Disbursement this Period 224.97 Transaction ID : D1325-01vg02
City Cocoa Beach	State FL	
Zip Code 32931	Purpose of Disbursement see memo entries	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Publix Super Markets, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 3300 Publix Corporate Parkway		Amount of Each Disbursement this Period 84.37 Transaction ID : D1-00N10Q
City Lakeland	State FL	
Zip Code 33811	Purpose of Disbursement event supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] Memo

Full Name (Last, First, Middle Initial) c. Kelly M. Walker		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 250 St. Lucie Lane, #6		Amount of Each Disbursement this Period 140.60 Transaction ID : D2-01vg03
City Cocoa Beach	State FL	
Zip Code 32931	Purpose of Disbursement mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] Memo

SUBTOTAL of Disbursements This Page (optional).....	224.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 83		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Kelly M. Walker		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 250 St. Lucie Lane, #6		Amount of Each Disbursement this Period 2551.12 Transaction ID : D1327-01vg04
City Cocoa Beach	State FL	
Zip Code 32931	Purpose of Disbursement salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Robert Watkins & Company		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 610 S. Boulevard		Amount of Each Disbursement this Period 2500.00 Transaction ID : D1352-001H1R
City Tampa	State FL	
Zip Code 33606	Purpose of Disbursement accounting services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Robert Watkins & Company		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 610 S. Boulevard		Amount of Each Disbursement this Period 169.27 Transaction ID : D1353-001H1S
City Tampa	State FL	
Zip Code 33606	Purpose of Disbursement postage/delivery	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5220.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 83	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Robert Watkins & Company			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 610 S. Boulevard			Amount of Each Disbursement this Period 2500.00	
City Tampa	State FL	Zip Code 33606	Transaction ID : D1354-001H1T	
Purpose of Disbursement accounting services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. eDonations.com			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 117 N. Saint Asaph Street			Amount of Each Disbursement this Period 3325.85	
City Alexandria	State VA	Zip Code 22314	Transaction ID : D1395-00G31I	
Purpose of Disbursement online fundraising		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5825.85
TOTAL This Period (last page this line number only).....	114403.62

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Friends of Bill Posey

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Innovative Images

Mailing Address 1124 Woodsmere Parkway

City State Zip Code
 Rockledge FL 32955

Nature of Debt (Purpose):
 campaign shirts/bags

Outstanding Balance Beginning This Period	Transaction ID : 40	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1907.98"/>	<input type="text" value="0.00"/>	<input type="text" value="1907.98"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1907.98"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="1907.98"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1907.98"/>