

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

MICA FOR CONGRESS

ADDRESS (number and street) ▼

P. O. Box 181546

Check if different than previously reported. (ACC)

Casselberry

FL

32718

2. **FEC IDENTIFICATION NUMBER** ▼

C C00283051

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

FL

07

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 / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ / through / /

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 W Edward Langdon

Signature of Treasurer W Edward Langdon

[Electronically Filed]

Date

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MICA FOR CONGRESS

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))....	52750.00	61149.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	52750.00	61149.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	75135.92	149895.44
(b) Total Offsets to Operating Expenditures (from Line 14).....	2685.70	2985.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	72450.22	146909.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	97628.80	
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).....	10000.00	

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

MICA FOR CONGRESS

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).....	18725.00	23224.00
(ii) Unitemized.....	525.00	925.00
(iii) TOTAL of contributions from individuals ▶	19250.00	24149.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	33500.00	37000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	52750.00	61149.00
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.)	2685.70	2985.70
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	37.68	122.32
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	55473.38	64257.02

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	75135.92	149895.44
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	29450.00	42400.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	104585.92	192295.44

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	146741.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	55473.38
25. SUBTOTAL (add Line 23 and Line 24).....	202214.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	104585.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	97628.80

**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 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Belinda Keiser

Mailing Address 6069 NW 87th Ave

City Parkland State FL Zip Code 33067

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

Name of Employer Keiser University 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
 02 / 28 / 2013

Transaction ID : 0034393

Amount of Each Receipt this Period
 500.00

500.00

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

Mailing Address PO Box 2713

City Alexandria State VA Zip Code 22301

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

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
 02 / 28 / 2013

Transaction ID : 0034394

Amount of Each Receipt this Period
 500.00

500.00

[MEMO ITEM]
 Total earmarked through conduit. PAC limit not affected.

C. Full Name (Last, First, Middle Initial)
Mr. Robert W. Caldwell III

Mailing Address 1302 Ashby Circle

City Apopka State FL Zip Code 32703

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

Name of Employer self Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2013

Transaction ID : 0034394-0001

Amount of Each Receipt this Period
 475.00

475.00

Earmarked through Votesane PAC

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

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

975.00

**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 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Melissa Mahler

Mailing Address 2276 Northumbria Drive

City Sanford State FL Zip Code 32771

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

Name of Employer None Occupation Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2013

Transaction ID : 0034398

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Mr. John Dudinsky

Mailing Address Severn Farm
3878 Blufton Mill Road

City Free Union State VA Zip Code 22940

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

Name of Employer John Dudinsky & Assoc Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2013

Transaction ID : 0034421

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Joel S. Lisker

Mailing Address PO Box 10065

City McLean State VA Zip Code 22102

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

Name of Employer Lisker & Associates Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2013

Transaction ID : 0034422

Amount of Each Receipt this Period
 250.00

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 7 OF 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms. Sharon L. Pinkerton

Mailing Address 610 D St, SE

City Washington State DC Zip Code 20003

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

Name of Employer Air Transport Asso Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2013

Transaction ID : 0034444

Amount of Each Receipt this Period
500.00

On line contribution

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Athy

Mailing Address 1310 19th St, NW

City Washington State DC Zip Code 20036

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

Name of Employer O'Neill Athy & Casey Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034401

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Wallace D. Burnett

Mailing Address 400 N Capitol St, NW, Ste 363

City Washington State DC Zip Code 20001

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

Name of Employer Denny Miller Associates Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034404

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 8 OF 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Douglas M. Gregory

Mailing Address 101 Constitution Ave, NW, Ste 600W

City Washington State DC Zip Code 20001

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

Name of Employer Van Scoyoc Associates Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034405

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Michael Sauls

Mailing Address 14 Alexander Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Dudinsky & Associates Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034407

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Russell L. Roberts

Mailing Address 2117 Bancroft Place, NW

City Washington State DC Zip Code 20008

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

Name of Employer Florida East Coast Industries Occupation Vice president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034408

Amount of Each Receipt this Period
 500.00

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

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

1250.00

**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 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. John D. Milne

Mailing Address 409 G Street, SE

City Washington State DC Zip Code 20003

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

Name of Employer mCapitol Management Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034409

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
BGR Government Affairs, LLC

Mailing Address 601 Thirteenth St, NW
Eleventh Floor South

City Washington State DC Zip Code 20005

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

Name of Employer Occupation Partnership

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 28 / 2013

Transaction ID : 0034415

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Morteza H. Hosseini

Mailing Address 1116 Oxbridge Lane

City Ormond Beach State FL Zip Code 32174

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

Name of Employer Intervest Construction 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
 03 / 29 / 2013

Transaction ID : 0034429

Amount of Each Receipt this Period
 2500.00

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 10 OF 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Forough Hosseini

Mailing Address 1116 Oxbridge Lane

City State Zip Code
Ormond Beach FL 32174

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

Name of Employer Occupation
ICI Homes Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2013

Transaction ID : 0034430

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Nellie H. Kargar

Mailing Address 762 Cobblestone Way

City State Zip Code
Ormond Beach FL 32174

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

Name of Employer Occupation
ICI Homes Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2013

Transaction ID : 0034431

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Commander Christopher Hinn

Mailing Address 1521 Nela Avenue

City State Zip Code
Belle Isle FL 32809

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

Name of Employer Occupation
Self Consultant

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 Y
 03 / 29 / 2013

Transaction ID : 0034434

Amount of Each Receipt this Period
500.00

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 11 OF 53
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Genean McKinnon

Mailing Address 701 Via Bella

City State Zip Code
Winter Park FL 32789

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

Name of Employer Occupation
GrayRobinson Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2013

Transaction ID : 0034436

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Mr. Frederick W. Smith

Mailing Address 649 Sweetbriar Road

City State Zip Code
Memphis TN 38120

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

Name of Employer Occupation
Fed Ex Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2013

Transaction ID : 0034481

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Frederick W. Smith

Mailing Address 649 Sweetbriar Road

City State Zip Code
Memphis TN 38120

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

Name of Employer Occupation
Self Housewife

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2013

Transaction ID : 0034482

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

18725.00

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

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

FOR LINE NUMBER: PAGE 12 OF 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
The Home Depot Inc. PAC

Mailing Address 1155 F Street NW, Suite 400

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

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
 01 / 03 / 2013

Transaction ID : 0034365

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2211 Congress St

City Portland State ME Zip Code 04122

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

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
 01 / 22 / 2013

Transaction ID : 0034366

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Holland & Knight Committee for Effective Government

Mailing Address 2099 Pennsylvania Ave NW
Suite 100

City Washington State DC Zip Code 20006-6801

FEC ID number of contributing federal political committee. **C** C00171330

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
 03 / 13 / 2013

Transaction ID : 0034397

Amount of Each Receipt this Period
 1000.00

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 13 OF 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Maritime Officers, Voluntary Political Fund

Mailing Address 490 L'Enfant Plaza East SW
Suite 7204

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C C00027532**

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
03 / 13 / 2013

Transaction ID : 0034419

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Greyhound Lines PAC

Mailing Address PO Box 660362

City Dallas State TX Zip Code 75266

FEC ID number of contributing federal political committee. **C C00215129**

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
03 / 13 / 2013

Transaction ID : 0034423

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Siemens Corporation PAC

Mailing Address 300 New Jersey Ave, NW, Ste 1000

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00353797**

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
03 / 28 / 2013

Transaction ID : 0034402

Amount of Each Receipt this Period
1000.00

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

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

4500.00

**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 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Outdoor Advertising Political Action Committee

Mailing Address 1850 M Street, NW
Suite 1040

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00045781

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
 03 / 28 / 2013

Transaction ID : 0034403

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Asso. of Airport Executives Good Govt

Mailing Address 601 Madison St, Ste 400

City Alexandria State VA Zip Code 22314

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

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
 03 / 28 / 2013

Transaction ID : 0034406

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1100 Wilson Blvd, Ste 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

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
 03 / 28 / 2013

Transaction ID : 0034410

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 15 OF 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Herzog Contracting Corp. PAC

Mailing Address 3760 Kilroy Airport Way
Suite 120

City Long Beach State CA Zip Code 90806

FEC ID number of contributing federal political committee. **C** C00283051

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
 03 / 28 / 2013

Transaction ID : 0034411

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
BNSF RailPac

Mailing Address 500 New Jersey Ave, NW Ste 550

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00235739

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
 03 / 28 / 2013

Transaction ID : 0034412

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Deloitte Federal PAC

Mailing Address PO Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

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
 03 / 28 / 2013

Transaction ID : 0034413

Amount of Each Receipt this Period
 5000.00

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

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

8500.00

**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 53
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) Truck PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2013
Mailing Address 430 First Street SE		Transaction ID : 0034414
City Washington	State DC	Zip Code 20003-1826
FEC ID number of contributing federal political committee.	C C00002881	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Google NetPAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2013
Mailing Address 1101 New York Ave NW Second Floor		Transaction ID : 0034416
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	C C00428623	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) FAA Managers Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2013
Mailing Address 4410 Massachusetts Ave, NW, #315		Transaction ID : 0034417
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee.	C C00366070	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 53
	<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)
MICA FOR CONGRESS

A. Bill PAC

Full Name (Last, First, Middle Initial)
Mailing Address 228 S Washington St, #115

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00412288

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
 03 / 28 / 2013

Transaction ID : 0034418

Amount of Each Receipt this Period
 1000.00

B. American Airlines PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 17th Street NW Suite 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

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 29 / 2013

Transaction ID : 0034425

Amount of Each Receipt this Period
 1000.00

C. Employees of Northrop Grumman Corp. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2980 Fairview Park Drive

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00088591

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
 03 / 29 / 2013

Transaction ID : 0034426

Amount of Each Receipt this Period
 2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Aircraft Owners & Pilots Association PAC

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

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
 03 / 29 / 2013

Transaction ID : 0034427

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
National Business Aviation Association

Mailing Address 1200 18th St NW Ste 400

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00319723

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
 03 / 29 / 2013

Transaction ID : 0034428

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Ford Motor Company Civic Action Fund

Mailing Address PO Box 75000, PAC SVS MC 2250

City State Zip Code
Detroit MI 48275-2250

FEC ID number of contributing federal political committee. **C** C00046474

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
 03 / 29 / 2013

Transaction ID : 0034432

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 19 OF 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Citizens United Political Victory Fund

Mailing Address 1006 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00295527

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
 03 / 29 / 2013

Transaction ID : 0034433

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Honeywell Internatl. PAC

Mailing Address 101 Constitution Ave, NW, Ste 500W

City Washington State DC Zip Code 20001

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

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
 03 / 29 / 2013

Transaction ID : 0034435

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 600 Maryland Ave, SW, Ste 850E

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00100321

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
 03 / 29 / 2013

Transaction ID : 0034437

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

33500.00

**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 20 OF 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
City of Deltona

Mailing Address 2345 Providence Blvd

City	State	Zip Code
Deltona	FL	32725

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

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
 01 / 03 / 2013

Transaction ID : 0034363

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
SANDLER-INNOCENZI, Inc

Mailing Address 705 Prince Street

City	State	Zip Code
Alexandria	VA	22314

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

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
 03 / 02 / 2013

Transaction ID : 0034424

Amount of Each Receipt this Period

2585.70

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).....

2685.70

2685.70

**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 53
	<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)
MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Commerce National Bank & Trust

Mailing Address 1201 S Orlando Ave

City Winter Park State FL Zip Code 32790-8181

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
122.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : 0034483

Amount of Each Receipt this Period
37.68

Interest Income

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

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).....

37.68

37.68

**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 22 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Richard Q. Harkey		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2013
Mailing Address 229 Tollgate Road		Amount of Each Disbursement this Period 179.60 Transaction ID : 0034488
City Longwood	State FL	
Zip Code 32750	Purpose of Disbursement TRAVEL & MEAL EXPENSES	Category/ Type 002
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. Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 1001 North Fairfax St, #410		Amount of Each Disbursement this Period 1689.00 Transaction ID : 0034485
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Campaign Event Fee	Category/ Type 003
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. Wiley Deck		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 127 Candlestick Drive		Amount of Each Disbursement this Period 2500.00 Transaction ID : 0034484
City Stafford	State VA	
Zip Code 22554	Purpose of Disbursement Campaign Consulting	Category/ Type 001
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).....	4368.60
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 23 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bank of American VISA		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address PO Box 851001		Amount of Each Disbursement this Period 696.15 Transaction ID : 0034486
City Dallas	State TX	
Zip Code 75285	Purpose of Disbursement Meals with Constituents	ITEMIZATION BELOW
Candidate Name	003 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. House of Reps Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address B217 Longworth Building		Amount of Each Disbursement this Period 441.44 Transaction ID : 0034486-0004
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Gifts for Constituents	[MEMO ITEM] MEMO
Candidate Name	003 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. House of Reps Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address B217 Longworth Building		Amount of Each Disbursement this Period 133.20 Transaction ID : 0034486-0005
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Gifts for Constituents	[MEMO ITEM] MEMO
Candidate Name	003 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).....	696.15
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 24 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 7-11 Gas		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 481 N Orlando Ave		Amount of Each Disbursement this Period 51.01
City Maitland State FL Zip Code 32751	Purpose of Disbursement Gasoline Expenses 001 Category/Type	
Candidate Name		Transaction ID : 0034486-0006 [MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Millennium Consulting Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address PO Box 568926		Amount of Each Disbursement this Period 3526.40
City Orlando State FL Zip Code 32856	Purpose of Disbursement Media Advertising 004 Category/Type	
Candidate Name		Transaction ID : 0034448
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 7091.75
City Ft Lauderdale State FL Zip Code 33336	Purpose of Disbursement TRAVEL & MEAL EXPENSES 002 Category/Type	
Candidate Name		Transaction ID : 0034386 ITEMIZATION BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	10618.15
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 25 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 260.80
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Air Transportation	Category/Type 002	Transaction ID : 0034386-0001
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 116.80
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Air Transportation	Category/Type 002	Transaction ID : 0034386-0002
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. Freedompay		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 565 Swedsford Rd		Amount of Each Disbursement this Period 104.60
City Berwyn	State PA Zip Code 19312	
Purpose of Disbursement Meals with Constituents	Category/Type 003	Transaction ID : 0034386-0003
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] MEMO
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 26 OF 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Freedompay		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		03		2013
M M	/	D D	/	Y Y Y Y								
01		03		2013								
Mailing Address 565 Swedsford Rd		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Berwyn</td> <td>PA</td> <td>19312</td> </tr> </table>		City	State	Zip Code	Berwyn	PA	19312	<table border="1"> <tr> <td>114.20</td> </tr> </table>	114.20			
City	State	Zip Code										
Berwyn	PA	19312										
114.20												
Purpose of Disbursement Meals with Constituents		Transaction ID : 0034386-0004										
Candidate Name												
Office Sought:		[MEMO ITEM] MEMO										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>			<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President						
<input type="checkbox"/> House	Disbursement For: 2014											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Freedompay		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		03		2013
M M	/	D D	/	Y Y Y Y								
01		03		2013								
Mailing Address 565 Swedsford Rd		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Berwyn</td> <td>PA</td> <td>19312</td> </tr> </table>		City	State	Zip Code	Berwyn	PA	19312	<table border="1"> <tr> <td>126.63</td> </tr> </table>	126.63			
City	State	Zip Code										
Berwyn	PA	19312										
126.63												
Purpose of Disbursement Meals with Constituents		Transaction ID : 0034386-0005										
Candidate Name												
Office Sought:		[MEMO ITEM] MEMO										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>			<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President						
<input type="checkbox"/> House	Disbursement For: 2014											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. National Car Rental		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		03		2013
M M	/	D D	/	Y Y Y Y								
01		03		2013								
Mailing Address 200 S Andrews Ave		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Ft. Lauderdale</td> <td>FL</td> <td>33301</td> </tr> </table>		City	State	Zip Code	Ft. Lauderdale	FL	33301	<table border="1"> <tr> <td>263.60</td> </tr> </table>	263.60			
City	State	Zip Code										
Ft. Lauderdale	FL	33301										
263.60												
Purpose of Disbursement Car Rental		Transaction ID : 0034386-0008										
Candidate Name												
Office Sought:		[MEMO ITEM] MEMO										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>			<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President						
<input type="checkbox"/> House	Disbursement For: 2014											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

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 27 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Foundation for Seminole Cty Public Schoo		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 400 E Lake Mary Blvd		Amount of Each Disbursement this Period 000,000.00 100.00
City Sanford State FL Zip Code 32773	Purpose of Disbursement Charitable Contribution 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : 0034386-0009 [MEMO ITEM] MEMO
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Prime Rib Restaurant		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 2020 K Street		Amount of Each Disbursement this Period 000,000.00 374.05
City Washington State DC Zip Code 20006	Purpose of Disbursement Meals with Constituents 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : 0034386-0012 [MEMO ITEM] MEMO
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Briar Patch Restaurant		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 225 N Park Ave		Amount of Each Disbursement this Period 000,000.00 5.04
City Winter Park State FL Zip Code 32789	Purpose of Disbursement Meal Expenses 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : 0034386-0013 [MEMO ITEM] MEMO
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	000,000.00 0.00
TOTAL This Period (last page this line number only).....	000,000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Briar Patch Restaurant		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 225 N Park Ave		Amount of Each Disbursement this Period 86.60
City Winter Park	State FL	
Zip Code 32789	Purpose of Disbursement Meals with Constituents	Transaction ID : 0034386-0014
Candidate Name	Category/Type 003	
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. 310 Park South Restr.		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 310 S Park Ave		Amount of Each Disbursement this Period 49.86
City Winter Park	State FL	
Zip Code 32789	Purpose of Disbursement Meal Expenses	Transaction ID : 0034386-0018
Candidate Name	Category/Type 002	
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. Trader Joes		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 1101 25th St, NW		Amount of Each Disbursement this Period 235.06
City Washington	State DC	
Zip Code 20037	Purpose of Disbursement Meals with Constituents	Transaction ID : 0034386-0019
Candidate Name	Category/Type 003	
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] MEMO
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 29 OF 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Decatur House		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 1610 H St NW		Amount of Each Disbursement this Period 1620.48
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Gifts for Constituents	Transaction ID : 0034386-0020
Candidate Name	003 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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Linda's La Cantina		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 4721 E Colonial DR		Amount of Each Disbursement this Period 239.66
City Orlando	State FL	
Zip Code 32803	Purpose of Disbursement Meals with Constituents	Transaction ID : 0034386-0024
Candidate Name	003 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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) C. Washington Jefferson		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 318 W 51 St		Amount of Each Disbursement this Period 810.24
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging Expenses	Transaction ID : 0034386-0030
Candidate Name	002 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] MEMO
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 30 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. La Mela Ristorante		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 167 Mulberry St, Frnt		Amount of Each Disbursement this Period 304.22
City New York	State NY	
Zip Code 10013	Purpose of Disbursement Meals with Constituents	Transaction ID : 0034386-0032
Candidate Name	003 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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Palace Hotel New York		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 455 Madison Ave		Amount of Each Disbursement this Period 914.65
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Lodging Expenses	Transaction ID : 0034386-0033
Candidate Name	002 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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) C. Armando's		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 463 W New England Ave		Amount of Each Disbursement this Period 178.36
City Winter Park	State FL	
Zip Code 32789	Purpose of Disbursement Meals with Constituents	Transaction ID : 0034386-0046
Candidate Name	003 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] MEMO
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 31 OF 53			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 116 Inc			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2013		
Mailing Address 234 3rd St, NE			Amount of Each Disbursement this Period 398.70		
City Washington	State DC	Zip Code 20002	Transaction ID : 0034487		
Purpose of Disbursement Catering Services		Category/ Type 007			
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. Ms. Jillian Wist			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2013		
Mailing Address 17231 Cypress Preserve Pkwy			Amount of Each Disbursement this Period 125.60		
City Orlando	State FL	Zip Code 32820	Transaction ID : 0034449		
Purpose of Disbursement Transportation Expenses		Category/ Type 002			
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. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2013		
Mailing Address PO Box 660108			Amount of Each Disbursement this Period 181.28		
City Dallas	State TX	Zip Code 75266	Transaction ID : 0034442		
Purpose of Disbursement PHONE EXPENSES		Category/ Type 001			
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:				

SUBTOTAL of Disbursements This Page (optional).....	705.58
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 32 OF 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SANDLER-INNOCENZI, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address 705 Prince Street		Amount of Each Disbursement this Period 38811.85 Transaction ID : 0034476
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Advertising	Category/ Type 004
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. CenturyLink		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address P O Box 30784		Amount of Each Disbursement this Period 187.07 Transaction ID : 0034441
City Tampa	State FL	
Zip Code 33630	Purpose of Disbursement PHONE EXPENSES	Category/ Type 001
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. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address General Delivery		Amount of Each Disbursement this Period 972.18 Transaction ID : 0034471
City Atlanta	State GA	
Zip Code 39901	Purpose of Disbursement TAXES	Category/ Type 001
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).....	39971.10
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 33 OF 53			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address General Delivery		Amount of Each Disbursement this Period 139.19 Transaction ID : 0034472
City Atlanta	State GA	
Zip Code 39901	Purpose of Disbursement TAXES	Category/ Type 001
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. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2013
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 100.00 Transaction ID : 0034490
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit card processing fees	Category/ Type 003
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. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 2506.56 Transaction ID : 0034479
City Ft Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement TRAVEL & MEAL EXPENSES	Category/ Type 002
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:	ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional).....	2745.75
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 34 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pro Flowers.Com			Date of Disbursement MM / DD / YYYY 02 / 01 / 2013	
Mailing Address 5005 Wateridge Vista Dr			Amount of Each Disbursement this Period 67.06	
City San Diego	State CA	Zip Code 92121	Transaction ID : 0034479-0001	
Purpose of Disbursement FLOWERS		Category/ Type 003	[MEMO ITEM] MEMO	
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. Freedompay			Date of Disbursement MM / DD / YYYY 02 / 01 / 2013	
Mailing Address 565 Swedsford Rd			Amount of Each Disbursement this Period 119.05	
City Berwyn	State PA	Zip Code 19312	Transaction ID : 0034479-0002	
Purpose of Disbursement Meals with Constituents		Category/ Type 003	[MEMO ITEM] MEMO	
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. Freedompay			Date of Disbursement MM / DD / YYYY 02 / 01 / 2013	
Mailing Address 565 Swedsford Rd			Amount of Each Disbursement this Period 118.29	
City Berwyn	State PA	Zip Code 19312	Transaction ID : 0034479-0003	
Purpose of Disbursement Meals with Constituents		Category/ Type 003	[MEMO ITEM] MEMO	
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).....	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 35 OF 53			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Linda's La Cantina			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013		
Mailing Address 4721 E Colonial DR			Amount of Each Disbursement this Period 63.24		
City Orlando	State FL	Zip Code 32803	Transaction ID : 0034479-0004		
Purpose of Disbursement Meal Expenses		Category/ Type 002	[MEMO ITEM] MEMO		
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. JetBlue Airways			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013		
Mailing Address 118-29 Queens Boulevard			Amount of Each Disbursement this Period 263.70		
City Forest Hills	State NY	Zip Code 11375	Transaction ID : 0034479-0005		
Purpose of Disbursement Air Transportation		Category/ Type 002	[MEMO ITEM] MEMO		
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. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013		
Mailing Address 2702 Love Field Drive			Amount of Each Disbursement this Period 286.90		
City Dallas	State TX	Zip Code 75235	Transaction ID : 0034479-0006		
Purpose of Disbursement Air Transportation		Category/ Type 002	[MEMO ITEM] MEMO		
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:				

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 36 OF 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement MM / DD / YYYY 02 / 01 / 2013
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period 286.90
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Air Transportation	Transaction ID : 0034479-0007
Candidate Name	002 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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 02 / 01 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 177.90
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Air Transportation	Transaction ID : 0034479-0008
Candidate Name	002 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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 02 / 01 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 113.90
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Air Transportation	Transaction ID : 0034479-0009
Candidate Name	002 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] MEMO
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 37 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 260.90
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Air Transportation	Category/Type 002	Transaction ID : 0034479-0010
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Prime Rib Restaurant		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2013
Mailing Address 2020 K Street		Amount of Each Disbursement this Period 645.05
City Washington	State DC Zip Code 20006	
Purpose of Disbursement Meals with Constituents	Category/Type 003	Transaction ID : 0034479-0015
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. CenturyLink		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2013
Mailing Address P O Box 30784		Amount of Each Disbursement this Period 186.16
City Tampa	State FL Zip Code 33630	
Purpose of Disbursement PHONE EXPENSES	Category/Type 001	Transaction ID : 0034440
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).....	186.16
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 38 OF 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Petty Cash		M M / D D / Y Y Y Y 02 / 20 / 2013
Mailing Address P O Box 181546		Amount of Each Disbursement this Period
City	State	Zip Code
Casselberry	FL	32718
Purpose of Disbursement	Category/ Type	Transaction ID : 0034462
Petty Cash		001
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Verizon Wireless		M M / D D / Y Y Y Y 02 / 21 / 2013
Mailing Address PO Box 660108		Amount of Each Disbursement this Period
City	State	Zip Code
Dallas	TX	75266
Purpose of Disbursement	Category/ Type	Transaction ID : 0034443
PHONE EXPENSES		001
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Petty Cash		M M / D D / Y Y Y Y 02 / 22 / 2013
Mailing Address P O Box 181546		Amount of Each Disbursement this Period
City	State	Zip Code
Casselberry	FL	32718
Purpose of Disbursement	Category/ Type	Transaction ID : 0034463
Petty Cash		001
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	356.94
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 39 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 116.00 Transaction ID : 0034491
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit card processing fees 003 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. Petty Cash		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2013
Mailing Address P O Box 181546		Amount of Each Disbursement this Period 100.00 Transaction ID : 0034464
City Casselberry State FL Zip Code 32718	Purpose of Disbursement Petty Cash 001 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. Mr. W. Edward Langdon		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2013
Mailing Address 601 N Ferncreek #200		Amount of Each Disbursement this Period 5330.00 Transaction ID : 0034465
City Orlando State FL Zip Code 32803	Purpose of Disbursement ACCOUNTING SERVICES 001 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).....	5546.00
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 40 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. W. Edward Langdon		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2013
Mailing Address 601 N Ferncreek #200		Amount of Each Disbursement this Period 1850.00 Transaction ID : 0034466
City Orlando	State FL	
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type 001
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. Petty Cash		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2013
Mailing Address P O Box 181546		Amount of Each Disbursement this Period 100.00 Transaction ID : 0034453
City Casselberry	State FL	
Purpose of Disbursement Petty Cash		Category/ Type 001
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. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2013
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 4.50 Transaction ID : 0034447
City San Francisco	State CA	
Purpose of Disbursement Credit card processing fees		Category/ Type 003
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).....	1954.50
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 42 OF 53			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Freedompay		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		10		2013
M M	/	D D	/	Y Y Y Y								
03		10		2013								
Mailing Address 565 Swedsford Rd		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Berwyn</td> <td>PA</td> <td>19312</td> </tr> </table>		City	State	Zip Code	Berwyn	PA	19312	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00			
City	State	Zip Code										
Berwyn	PA	19312										
100.00												
Purpose of Disbursement Meals with Constituents		Transaction ID : 0034439-0001										
Candidate Name		[MEMO ITEM] MEMO										
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Freedompay		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		10		2013
M M	/	D D	/	Y Y Y Y								
03		10		2013								
Mailing Address 565 Swedsford Rd		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Berwyn</td> <td>PA</td> <td>19312</td> </tr> </table>		City	State	Zip Code	Berwyn	PA	19312	<table border="1"> <tr> <td>118.25</td> </tr> </table>	118.25			
City	State	Zip Code										
Berwyn	PA	19312										
118.25												
Purpose of Disbursement Meals with Constituents		Transaction ID : 0034439-0002										
Candidate Name		[MEMO ITEM] MEMO										
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. US AIRWAYS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>10</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		10		2013
M M	/	D D	/	Y Y Y Y								
03		10		2013								
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85034</td> </tr> </table>		City	State	Zip Code	Phoenix	AZ	85034	<table border="1"> <tr> <td>1499.00</td> </tr> </table>	1499.00			
City	State	Zip Code										
Phoenix	AZ	85034										
1499.00												
Purpose of Disbursement Air Transportation		Transaction ID : 0034439-0003										
Candidate Name		[MEMO ITEM] MEMO										
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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 43 OF 53			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement MM / DD / YYYY 03 / 10 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 579.00
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Air Transportation	Category/Type 002	Transaction ID : 0034439-0004
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. US AIRWAYS		Date of Disbursement MM / DD / YYYY 03 / 10 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 145.90
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Air Transportation	Category/Type 002	Transaction ID : 0034439-0005
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) C. US AIRWAYS		Date of Disbursement MM / DD / YYYY 03 / 10 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 263.90
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Air Transportation	Category/Type 002	Transaction ID : 0034439-0006
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] MEMO
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 44 OF 53			
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US AIRWAYS		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 400 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 145.90
City Phoenix	State AZ	Zip Code 85034
Purpose of Disbursement Air Transportation	Category/Type 002	
Candidate Name	Transaction ID : 0034439-0007	
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address Hartsfield Int'l Airport		Amount of Each Disbursement this Period 220.80
City Atlanta	State GA	Zip Code 40440
Purpose of Disbursement Air Transportation	Category/Type 002	
Candidate Name	Transaction ID : 0034439-0008	
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. National Car Rental		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 200 S Andrews Ave		Amount of Each Disbursement this Period 519.16
City Ft. Lauderdale	State FL	Zip Code 33301
Purpose of Disbursement Car Rental	Category/Type 002	
Candidate Name	Transaction ID : 0034439-0010	
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] MEMO
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 45 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Linda's La Cantina		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 4721 E Colonial DR		Amount of Each Disbursement this Period 104.44
City Orlando State FL Zip Code 32803	Purpose of Disbursement Meals with Constituents 003 Category/Type	
Candidate Name		Transaction ID : 0034439-0014 [MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Linda's La Cantina		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 4721 E Colonial DR		Amount of Each Disbursement this Period 251.17
City Orlando State FL Zip Code 32803	Purpose of Disbursement Meals with Constituents 003 Category/Type	
Candidate Name		Transaction ID : 0034439-0015 [MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. 310 Park South Restr.		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 310 S Park Ave		Amount of Each Disbursement this Period 119.68
City Winter Park State FL Zip Code 32789	Purpose of Disbursement Meals with Constituents 003 Category/Type	
Candidate Name		Transaction ID : 0034439-0016 [MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 46 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 310 Park South Restr.		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 310 S Park Ave		Amount of Each Disbursement this Period 142.95
City Winter Park	State FL	Zip Code 32789
Purpose of Disbursement Meals with Constituents	Category/Type 003	
Candidate Name	Transaction ID : 0034439-0017	
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) B. Briar Patch Restaurant		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 225 N Park Ave		Amount of Each Disbursement this Period 15.30
City Winter Park	State FL	Zip Code 32789
Purpose of Disbursement Meal Expenses	Category/Type 002	
Candidate Name	Transaction ID : 0034439-0018	
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. Briar Patch Restaurant		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 225 N Park Ave		Amount of Each Disbursement this Period 25.99
City Winter Park	State FL	Zip Code 32789
Purpose of Disbursement Meal Expenses	Category/Type 002	
Candidate Name	Transaction ID : 0034439-0019	
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).....	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 47 OF 53	
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Doubletree Hotel Tallahassee		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 101 S Adams Street		Amount of Each Disbursement this Period 406.61
City Tallahassee	State FL Zip Code 32301	
Purpose of Disbursement Lodging Expenses	Category/Type 002	Transaction ID : 0034439-0026
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] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Winter Park Racquet Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address 2111 Via Tuscany		Amount of Each Disbursement this Period 385.25
City Winter Park	State FL Zip Code 32789	
Purpose of Disbursement Meals with Constituents	Category/Type 003	Transaction ID : 0034460
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. Petty Cash		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2013
Mailing Address P O Box 181546		Amount of Each Disbursement this Period 100.00
City Casselberry	State FL Zip Code 32718	
Purpose of Disbursement Petty Cash	Category/Type 001	Transaction ID : 0034455
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).....	485.25
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 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U. S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address 109 Live Oak Blvd		Amount of Each Disbursement this Period 230.00 Transaction ID : 0034467
City Casselberry	State FL	
Zip Code 32707	Purpose of Disbursement POSTAGE, NON-BULK MAIL	Category/ Type 001
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. Piryx, Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2013
Mailing Address 144 2nd St, 1st Floor		Amount of Each Disbursement this Period 22.50 Transaction ID : 0034445
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit card processing fees	Category/ Type 003
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. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2013
Mailing Address General Delivery		Amount of Each Disbursement this Period 264.00 Transaction ID : 0034473
City Atlanta	State GA	
Zip Code 39901	Purpose of Disbursement TAXES	Category/ Type 001
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).....	516.50
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 49 OF 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Petty Cash		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address P O Box 181546		Amount of Each Disbursement this Period 100.00 Transaction ID : 0034456
City Casselberry	State FL	
Zip Code 32718	Purpose of Disbursement Petty Cash	Category/ Type 001
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. The Congressional Club		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2013
Mailing Address 2001 New Hampshire Ave, NW		Amount of Each Disbursement this Period 500.00 Transaction ID : 0034470
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Membership Dues	Category/ Type 001
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2013
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 113.22 Transaction ID : 0034489
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement PHONE EXPENSES	Category/ Type 001
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).....	713.22
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 53		
	<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)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Petty Cash		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>27</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	03		27		2013
M M	/	D D	/	Y Y Y Y									
03		27		2013									
Mailing Address P O Box 181546		Amount of Each Disbursement this Period											
City Casselberry State FL Zip Code 32718 Purpose of Disbursement Petty Cash 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)		<table border="1"> <tr> <td>100.00</td> </tr> </table> Transaction ID : 0034457		100.00									
100.00													
State: District:		Category/Type											
		001											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address		Amount of Each Disbursement this Period											
City State Zip Code Purpose of Disbursement 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)		<table border="1"> <tr> <td></td> </tr> </table>											
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address		Amount of Each Disbursement this Period											
City State Zip Code Purpose of Disbursement 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)		<table border="1"> <tr> <td></td> </tr> </table>											
State: District:		Category/Type											

SUBTOTAL of Disbursements This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	74872.79

**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 53	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. University of Central FL Foundation Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2013
Mailing Address 12424 Research Pkwy, Ste 250		Amount of Each Disbursement this Period 2000.00 Transaction ID : 0034478
City Orlando State FL Zip Code 32826	Purpose of Disbursement Charitable Contribution 012 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. NATIONAL REPUBLICAN CONGRESS. COMMITT.		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address 320 First Street, SE		Amount of Each Disbursement this Period 25000.00 Transaction ID : 0034477
City Washington State DC Zip Code 20003	Purpose of Disbursement Transfer 008 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. Seminole State College Foundation		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address 100 Weldon Blvd		Amount of Each Disbursement this Period 2000.00 Transaction ID : 0034474
City Sanford State FL Zip Code 32773	Purpose of Disbursement Charitable Contribution 012 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).....	29000.00
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 53	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MICA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Florida Opera Theatre		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address 10993 Piping Rock Circle		Amount of Each Disbursement this Period 200.00 Transaction ID : 0034475
City Orlando	State FL Zip Code 32817	
Purpose of Disbursement Charitable Contribution	Category/Type 012	
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. Negro Spiritual Scholarship Foundation		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2013
Mailing Address 111 N Orange Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : 0034480
City Orlando	State FL Zip Code 32804	
Purpose of Disbursement Charitable Contribution	Category/Type 012	
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. Slovak Gardens Scholar Fund		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013
Mailing Address 3110 Howell Branch Road		Amount of Each Disbursement this Period 50.00 Transaction ID : 0034452
City Winter Park	State FL Zip Code 32792	
Purpose of Disbursement Charitable Contribution	Category/Type 012	
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).....	450.00
TOTAL This Period (last page this line number only).....	29450.00

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

NAME OF COMMITTEE (In Full)

MICA FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Millennium Consulting Inc.

Mailing Address PO Box 568926

City State Zip Code
 Orlando FL 32856

Nature of Debt (Purpose):
 Media Consulting

Outstanding Balance Beginning This Period	Transaction ID : 34355-5	
10000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SANDLER-INNOCENZI, Inc

Mailing Address 705 Prince Street

City State Zip Code
 Alexandria VA 22314

Nature of Debt (Purpose):
 Media Advertising

Outstanding Balance Beginning This Period	Transaction ID : 34896-5	
38811.85		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	38811.85	0.00

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	10000.00
2) TOTALS This Period (last page this line number only)	10000.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	10000.00