

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Tom Feeny for Congress

ADDRESS (number and street) 610 S. Boulevard

Check if different than previously reported. (ACC) Tampa FL 33606

2. **FEC IDENTIFICATION NUMBER** C00368951

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A) FL 24

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on in the State of

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

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

Election on 11 04 2008 in the State of FL

5. Covering Period 10 16 2008 through 11 24 2008

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

Type or Print Name of Treasurer Nancy H. Watkins

Signature of Treasurer Electronically Filed by Nancy H. Watkins Date 01 26 2009

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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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Tom Feeney for Congress

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	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)).....	169646.97	2120302.82
(b) Total Contribution Refunds (from Line 20(d)).....	200.00	9250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	169446.97	2111052.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	596634.40	1782426.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	188.66	11953.29
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	596445.74	1770473.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	238794.93	
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).....	5179.21	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

**POST-ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Tom Feeney for Congress

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
62781.40	746423.62	250.00																																																
(ii) Unitemized																																																		
14615.57	174745.47	470.00																																																
(iii) Total of contributions from individuals																																																		
77396.97	921169.09	720.00																																																
(b) Political Party Committees																																																		
0.00	13000.00	0.00																																																
(c) Other Political Committees																																																		
92250.00	1186133.73	0.00																																																

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
169646.97	2120302.82	720.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	13662.93	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
188.66	11953.29	188.66
15. OTHER RECEIPTS (Dividends, Interest, etc)		
594.99	13547.90	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
170430.62	2159466.94	908.66

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Tom Feeney for Congress

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
596634.40	1782426.85	65894.60
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	15000.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
200.00	8250.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	1000.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

200.00	9250.00	0.00
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21. OTHER DISBURSEMENTS

46000.00	129328.00	0.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

642834.40	1936004.85	65894.60
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

169446.97	2111052.82	720.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

596445.74	1770473.56	65705.94
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	711198.71
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	170430.62
25. SUBTOTAL(add Line 23 and Line 24)	881629.33
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	642834.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	238794.93

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Dan Adovasio

Mailing Address P. O. Box 541275

City State Zip Code
Merritt Island FL 32954

FEC ID number of contributing federal political committee. C

Name of Employer self-employed Occupation
insurance agent

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2008

Transaction ID: C-58-005s08

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Jeffrey J. Ahmed

Mailing Address 2044 S. Peninsula Drive

City State Zip Code
Daytona Beach FL 32118

FEC ID number of contributing federal political committee. C

Name of Employer self-employed Occupation
physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 555.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2008

Transaction ID: C-71-00V90C

Amount of Each Receipt this Period
40.00

Earmarked-> Club for Grow rcvd. 102308
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Andrew L. Asher

Mailing Address 4767 New Broad Street

City State Zip Code
Orlando FL 32814

FEC ID number of contributing federal political committee. C

Name of Employer Andrew L. Asher Occupation
attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2008

Transaction ID: C-294-02ZW01

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 740.00

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 8 / 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Silas K. Baker	Date of Receipt MM / DD / YYYY 11 / 03 / 2008
	Mailing Address 1272 Admiralty Blvd.	Transaction ID: C-361-01xt07
	City State Zip Code Rockledge FL 32955	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer n/a Occupation retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) James W. Barden	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 3 E. New Hampshire Street	Transaction ID: C-411-01nb02
	City State Zip Code Orlando FL 32804	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation teacher Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Peter C. Barr	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 514 Palmer Street	Transaction ID: C-430-003O09
	City State Zip Code Orlando FL 32801	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Fry Hammond Barr, Inc. Occupation advertising Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional)	775.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey L. Bonggren
Mailing Address 4145 Hickory Lane Court
City Titusville State FL Zip Code 32780
FEC ID number of contributing federal political committee. **C**
Name of Employer Boeing Occupation software engineer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt 10 / 17 / 2008
Transaction ID: C-677-01cY05
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Donald Boyd
Mailing Address 645 Lawnwood Drive
City Greenwood State IN Zip Code 46142
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 502.00
Date of Receipt 10 / 30 / 2008
Transaction ID: C-710-02b601
Amount of Each Receipt this Period 502.00
Earmarked-> Club for Grow rcvd. 102008
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Irma Braman
Mailing Address 1 Indian Creek Drive
City Indian Creek Villa State FL Zip Code 33154
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt 10 / 16 / 2008
Transaction ID: C-745-00T902
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2902.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Norman Braman

Mailing Address 1 Indian Creek Drive

City State Zip Code
Indian Creek Villa FL 33154

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

Name of Employer Occupation
Braman Motor Cars auto dealer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8

Transaction ID: C-746-00T802

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Scott H. Brandt

Mailing Address 4613 Van Kleeck Drive

City State Zip Code
New Smyrna Beach FL 32169

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

Name of Employer Occupation
Brandt Equities, LLC stock trader

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: C-757-02ZB01

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
William T. Buckley

Mailing Address 635 MacGlenross Drive

City State Zip Code
Oviedo FL 32765

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

Name of Employer Occupation
Florida Land Design, Inc. engineering project manager

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: C-856-00nJ06

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4400.00**

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: PAGE 11 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Mike Bulaga
Mailing Address P.O. Box 140462
City Orlando State FL Zip Code 32814
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 450.00
Date of Receipt 10 / 17 / 2008
Transaction ID: C-873-01jL09
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Frank A. Buonauro
Mailing Address 24 Pine Street
City Windermere State FL Zip Code 34786
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation flea market owner
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt 11 / 03 / 2008
Transaction ID: C-879-00TK06
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
J. Albert Burnett
Mailing Address 1025 Anchorage Street
City Winter Park State FL Zip Code 32789
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 750.00
Date of Receipt 10 / 22 / 2008
Transaction ID: C-913-02BP02
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1050.00
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 12 / 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Harold T. Butts		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 750 Pelican Bay Drive		Transaction ID: C-943-01Lo07
	City Daytona Beach	State FL	Zip Code 32119
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer Nursery 44, Inc.	Occupation nurseryman	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00		

B.	Full Name (Last, First, Middle Initial) Cesar E. Calvet		Date of Receipt MM / DD / YYYY 10 / 17 / 2008
	Mailing Address 2203 Snow Road		Transaction ID: C-1001-00Jh04
	City Orlando	State FL	Zip Code 32814
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer CNL Bank	Occupation banker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00		

C.	Full Name (Last, First, Middle Initial) Clint D. Carlson		Date of Receipt MM / DD / YYYY 10 / 20 / 2008
	Mailing Address 3658 Stratford Avenue		Transaction ID: C-1038-02ZK01
	City Dallas	State TX	Zip Code 75205
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Carlson Capital	Occupation investor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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: PAGE 13 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Steven H. Carolus

Mailing Address 1550 Bullbush Way

City State Zip Code
Oviedo FL 32765

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

Name of Employer Occupation
E*Trade sales trader

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: C-1048-011905

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Walter N. Carpenter

Mailing Address 824 N. Highland Avenue

City State Zip Code
Orlando FL 32803

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

Name of Employer Occupation
Pinel & Carpenter, Inc. owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-1049-02Zf01

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Daryl M. Carter

Mailing Address P.O. Box 568821

City State Zip Code
Orlando FL 32856

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

Name of Employer Occupation
Maury L. Carter & Assoc., Inc. president

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C-1064-021Z04

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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: PAGE 14 / 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Maury L. Carter

Mailing Address P.O. Box 568821

City State Zip Code
Orlando FL 32856

FEC ID number of contributing federal political committee. C

Name of Employer
Maury L. Carter & Assoc., Inc.

Occupation
vice-president

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2008

Transaction ID: C-1072-021Y03

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
David Castillo

Mailing Address 1727 Tealbriar Avenue

City State Zip Code
Oviedo FL 32765

FEC ID number of contributing federal political committee. C

Name of Employer
Alliance

Occupation
insurance

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1375.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2008

Transaction ID: C-1098-02CI03

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Charlie L. Cobb

Mailing Address 1198 Siesta Key Circle

City State Zip Code
Port Orange FL 32128

FEC ID number of contributing federal political committee. C

Name of Employer
State Farm Insurance

Occupation
insurance agent

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3550.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2008

Transaction ID: C-1242-00PN00

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2250.00

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 15 / 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Charlie L. Cobb		Date of Receipt
	Mailing Address 1198 Siesta Key Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 3 / 2 0 0 8
	City	State	Zip Code
	Port Orange	FL	32128
	FEC ID number of contributing federal political committee. C		Transaction ID: C-1243-00PN0P
Name of Employer State Farm Insurance		Occupation insurance agent	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 3550.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Emory B. Coffey		Date of Receipt
	Mailing Address 835 Ardenleigh Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Orlando	FL	32828
	FEC ID number of contributing federal political committee. C		Transaction ID: C-1249-01m005
Name of Employer n/a		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Jessica Corcoran		Date of Receipt
	Mailing Address 7318 W. Capps Highway		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Monticello	FL	32344
	FEC ID number of contributing federal political committee. C		Transaction ID: C-1372-002902
Name of Employer n/a		Occupation homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
		<input type="text"/> 2300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2875.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

<p>A. Full Name (Last, First, Middle Initial) Michael C. Corcoran</p> <p>Mailing Address 7318 W. Capps Highway</p> <p>City State Zip Code Monticello FL 32344</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Capitol Consulting, Inc. political consultant</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8</p> <p>Transaction ID: C-1373-002B03</p> <p>Amount of Each Receipt this Period 2300.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Robert C. Cowen</p> <p>Mailing Address 2756 Indian Springs Road</p> <p>City State Zip Code Marianna FL 32446</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation n/a retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">385.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8</p> <p>Transaction ID: C-1424-01uR08</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Thomas N. Crosby</p> <p>Mailing Address 1464 Pelican Bay Trail</p> <p>City State Zip Code Winter Park FL 32792</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation self-employed physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 8</p> <p>Transaction ID: C-1464-01Hd0H</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	2450.00
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: PAGE 17 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

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

Mailing Address 2308 Bur Oak Court

City Oviedo State FL Zip Code 32766

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

Name of Employer Banking Solutions, Inc. Occupation consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: C-1532-01ah04
 Amount of Each Receipt this Period: 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3038 Randleman Court

City Oviedo State FL Zip Code 32765

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

Name of Employer Thomas Osborne & Assoc. Occupation accountant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 235.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: C-1542-01ct08
 Amount of Each Receipt this Period: 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6853 Windover Way

City Titusville State FL Zip Code 32780

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 310.00

Date of Receipt: 10 / 17 / 2008
Transaction ID: C-1663-01tu07
 Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 275.00

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: PAGE 18 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

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

Mailing Address 3864 Brantley Place Circle

City State Zip Code
Apopka FL 32703

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

Name of Employer Occupation
Florida Oncology Network, P.A. physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-1681-005y06

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Deno P. Dikeou

Mailing Address 549 Wymore Road, #106

City State Zip Code
Maitland FL 32751

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

Name of Employer Occupation
Dikeou Realty attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C-1705-01oB05

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 487

City State Zip Code
Winter Park FL 32790

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

Name of Employer Occupation
self-employed investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C-1714-014n0A

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4050.00**

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: PAGE 19 / 151

(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Roger W. Dobson

Mailing Address 6245 S. Tropical Trail

City State Zip Code
Merritt Island FL 32952

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

Name of Employer Occupation
n/a retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

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

Transaction ID: C-1728-002L09

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Douglas S. Doudney

Mailing Address 1443 Buckwood Drive

City State Zip Code
Orlando FL 32806

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

Name of Employer Occupation
Doudney Investment Co. real estate

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 781.88

Date of Receipt

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

Transaction ID: C-1763-026a03

Amount of Each Receipt this Period

181.88

food & beverage

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

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

Mailing Address 2536 Corbyton Court

City State Zip Code
Orlando FL 32828

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

Name of Employer Occupation
n/a retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: C-1822-02JA05

Amount of Each Receipt this Period

25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

456.88

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: PAGE 20 / 151
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Joseph E. Fabel

Mailing Address 12419 Palm Tree Drive

City State Zip Code
Thonotosassa FL 33592

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C-1980-01uB05

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Eblan Y. Farris

Mailing Address 820 Peregrine Drive

City State Zip Code
Melbourne FL 32903

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

Name of Employer NASA Occupation sr. avionc engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-2024-02Zi01

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Jeffrey Feingold

Mailing Address 7401 Sedona Way

City State Zip Code
Delray Beach FL 33446

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

Name of Employer MCNA Dental Occupation president/c.e.o.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-2066-02af01

Amount of Each Receipt this Period
500.00

Earmarked-> Republican Je
rcvd. 102208

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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: PAGE 21 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Geraldine M. Ferris
Mailing Address 2118 Lake Drive
City Winter Park State FL Zip Code 32789
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation dentist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1650.00
Date of Receipt 11 / 03 / 2008
Transaction ID: C-2096-00UG0G
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Raymond K. Ferwerda
Mailing Address 5001-A1 Pilgrims Pathway
City Tampa State FL Zip Code 33611
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 625.00
Date of Receipt 10 / 16 / 2008
Transaction ID: C-2103-01460E
Amount of Each Receipt this Period 75.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Raymond K. Ferwerda
Mailing Address 5001-A1 Pilgrims Pathway
City Tampa State FL Zip Code 33611
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 625.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-2104-01460F
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 375.00
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: PAGE 22 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Paul M. Finer
Mailing Address 955 Lancaster Drive
City Orlando State FL Zip Code 32806
FEC ID number of contributing federal political committee. **C**
Name of Employer Wolverine Anesthesia Consultants Occupation physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-2125-007u0B
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mark W. Flynn
Mailing Address 210 Britt Street
City Tallahassee State FL Zip Code 32301
FEC ID number of contributing federal political committee. **C**
Name of Employer M. W. Flynn & Assoc., Inc. Occupation lobbyist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 10 / 31 / 2008
Transaction ID: C-2194-014302
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Juanita P. Gioenco
Mailing Address 2960 Goose Creek Road, #D308
City Louisville State KY Zip Code 40241
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 10 / 21 / 2008
Transaction ID: C-2433-01ro03
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 850.00
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: PAGE 23 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Larry Godwin
 Mailing Address 4776 New Broad Street, #250
 City Orlando State FL Zip Code 32814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Colony Homes Occupation builder
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt 10 / 21 / 2008
Transaction ID: C-2451-006k06
 Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kenneth L. Gregory
 Mailing Address 2439 Teton Stone Run
 City Orlando State FL Zip Code 32828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Holland Pools Occupation engineer
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 430.00
 Date of Receipt 11 / 03 / 2008
Transaction ID: C-2545-02Qz02
 Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bridget A. Gregory-Nocco
 Mailing Address 2502 Dawley Avenue
 City Orlando State FL Zip Code 32806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bridget Gregory, Inc. Occupation president
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt 10 / 21 / 2008
Transaction ID: C-2546-000P01
 Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 850.00
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: PAGE 24 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
James W. Handley
Mailing Address 10 Willow Green Drive
City State Zip Code
Cocoa Beach FL 32931
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8
Transaction ID: C-2683-00Su07
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Amine Tom Harb
Mailing Address 9025 Balmoral Mews Square
City State Zip Code
Windermere FL 34786
FEC ID number of contributing federal political committee. **C**
Name of Employer Harbco Company Occupation engineer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8
Transaction ID: C-2696-000O06
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Tom Harb
Mailing Address 3026 Porto Lago Court
City State Zip Code
Windermere FL 34786
FEC ID number of contributing federal political committee. **C**
Name of Employer Harbco Development Occupation president
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8
Transaction ID: C-2699-01TZ06
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
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: PAGE 25 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Tom Harb

Mailing Address 3026 Porto Lago Court

City State Zip Code
Windermere FL 34786

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

Name of Employer Harbco Development Occupation president

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-2700-01TZ07

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
W. Gerald Harrison

Mailing Address 1012 W. 11th Street

City State Zip Code
Panama City FL 32401

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

Name of Employer self-employed Occupation dentist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: C-2754-01EC0A

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ingrid D. Hellender

Mailing Address 468 Raymond Avenue

City State Zip Code
Longwood FL 32750

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

Name of Employer n/a Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-2826-01te07

Amount of Each Receipt this Period
35.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **785.00**

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: PAGE 26 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
John D. Helman
Mailing Address 1350 Spring Side Drive, W.
City Chambersburg State PA Zip Code 17201
FEC ID number of contributing federal political committee. **C**
Name of Employer Brechbill & Helman Occupation partner
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 27 / 2008
Transaction ID: C-2828-02Zv01
Amount of Each Receipt this Period 700.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jane E. Homewood
Mailing Address 6404 21st Avenue, N.W., #H502
City Bradenton State FL Zip Code 34209
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 17 / 2008
Transaction ID: C-2972-01uv07
Amount of Each Receipt this Period 25.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Constance D. Hunter
Mailing Address 4329 S. Atlantic Avenue
City Ponce Inlet State FL Zip Code 32127
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 30 / 2008
Transaction ID: C-3079-00NS0J
Amount of Each Receipt this Period 35.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **760.00**
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: PAGE 27 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

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

Mailing Address 515 S. Flower Street

City State Zip Code
Los Angeles CA 90071

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

Name of Employer Occupation
Paul Hastings Janofsky & Walker tax attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C-3133-02a101

Amount of Each Receipt this Period
1000.00

Earmarked-> Susan B. Anth
rcvd. 102308
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
L. Samir Jallad

Mailing Address 1830 Fawsett Road

City State Zip Code
Winter Park FL 32789

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

Name of Employer Occupation
Accredited Surety & Casualty surety bonds

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-3165-01Yd0A

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Fred E. Karlinsky

Mailing Address 913 Spoonbill Circle

City State Zip Code
Weston FL 33326

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

Name of Employer Occupation
Colodny, Fass & Talenfeld attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C-3326-00Bn06

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3800.00**

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: PAGE 28 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Maxwell C. King

Mailing Address 1384 Walton Heath Court

City State Zip Code
Rockledge FL 32955

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: C-3467-00ET08

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2629 Upper Park Road

City State Zip Code
Orlando FL 32814

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

Name of Employer Neurological Services of Orlando Occupation physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-3487-011b06

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1301 Hill Street

City State Zip Code
New Smyrna Beach FL 32169

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

Name of Employer n/a Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-3529-026b02

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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: PAGE 29 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Johnnie B. Kump
Mailing Address 3635 Miriam Drive
City Titusville State FL Zip Code 32796
FEC ID number of contributing federal political committee. **C**
Name of Employer Hubbs-SeaWorld Research Institute Occupation development director
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 10 / 21 / 2008
Transaction ID: C-3591-001Y06
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David L. Lageschulte
Mailing Address 2644 Shriver Drive
City Fort Myers State FL Zip Code 33901
FEC ID number of contributing federal political committee. **C**
Name of Employer LTP Management Occupation restaurateur
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt 10 / 24 / 2008
Transaction ID: C-3614-010302
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas Lankford
Mailing Address 5572 Mary's Lot Lane
City Westover State MD Zip Code 21871
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 10 / 17 / 2008
Transaction ID: C-3647-02ZJ01
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3350.00
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: PAGE 30 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

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

Mailing Address 13459 Lake Turnberry Circle

City Orlando State FL Zip Code 32828

FEC ID number of contributing federal political committee. C

Name of Employer self-employed Occupation consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 8

Transaction ID: C-3674-01hV02

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bertha F. Leonard

Mailing Address 120 N. Christmas Hills Road

City Titusville State FL Zip Code 32796

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-3713-01nz08

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 11

City Bristol State RI Zip Code 02809

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: C-3783-02cl01

Amount of Each Receipt this Period 250.00

Earmarked-> Club for Grow rcvd. 102708

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 550.00

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: PAGE 31 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Harry Lucas

Mailing Address 2303 Rio Grande Street

City State Zip Code
Austin TX 78705

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

Name of Employer Lucas Petroleum Group, Inc.
Occupation chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: C-3823-00yF02

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Catheryn S. Martin

Mailing Address 1514 N. Halifax Drive

City State Zip Code
Daytona Beach FL 32118

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

Name of Employer n/a
Occupation homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 550.00

Transaction ID: C-3972-016W07

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Daniel D. Martin

Mailing Address R.R. 3, Box 115

City State Zip Code
Carrollton IL 62016

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

Name of Employer n/a
Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 600.00

Transaction ID: C-3976-02R002

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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: PAGE 32 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Daniel D. Martin

Mailing Address R.R. 3, Box 115

City State Zip Code
Carrollton IL 62016

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

Name of Employer Occupation
n/a retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
11 / 01 / 2008

Transaction ID: C-3977-02R003

Amount of Each Receipt this Period
250.00

Earmarked -> Susan B. Anth
rcvd. 102708
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 12 Colonial Lane

City State Zip Code
Riverside CT 06878

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

Name of Employer Occupation
Sidley Austin, LLP attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 20 / 2008

Transaction ID: C-4147-01iZ02

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4101 Perimeter Center Drive, #210

City State Zip Code
Oklahoma City OK 73112

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

Name of Employer Occupation
self-employed investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
10 / 21 / 2008

Transaction ID: C-4189-02ZQ01

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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: PAGE 33 / 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Greg Mesack

Mailing Address 1101 16th Street, N.W., #400

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
The ERIS Group govt. relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1122.52

Date of Receipt

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

Transaction ID: C-4216-02cS01

Amount of Each Receipt this Period

219.00

transportation

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Greg Mesack

Mailing Address 1101 16th Street, N.W., #400

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
The ERIS Group govt. relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1122.52

Date of Receipt

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

Transaction ID: C-4217-02cS02

Amount of Each Receipt this Period

609.31

lodging

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Greg Mesack

Mailing Address 1101 16th Street, N.W., #400

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation
The ERIS Group govt. relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1122.52

Date of Receipt

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

Transaction ID: C-4218-02cS03

Amount of Each Receipt this Period

294.21

transportation

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ►

1122.52

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: PAGE 34 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
J. Patrick Michaels
Mailing Address 101 E. Kennedy Blvd., #3300
City Tampa State FL Zip Code 33602
FEC ID number of contributing federal political committee. **C**
Name of Employer CEA Worldwide Occupation venture capital
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2800.00
Date of Receipt 10 / 16 / 2008
Transaction ID: C-4240-007003
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Linda G. Miller
Mailing Address 4581 Portage Trail
City Melbourne State FL Zip Code 32940
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00
Date of Receipt 10 / 17 / 2008
Transaction ID: C-4297-01D706
Amount of Each Receipt this Period 40.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Elizabeth Moody
Mailing Address 107 Sea Island Circle
City Daytona Beach State FL Zip Code 32114
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-4360-00vA0A
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 640.00
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: PAGE 35 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Joseph H. Moore
Mailing Address P.O. Box 5132
City Sun City West State AZ Zip Code 85376
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt 11 / 03 / 2008
Transaction ID: C-4386-02Nx03
Amount of Each Receipt this Period 300.00
Earmarked-> Concerned Wom rcvd. 102908
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Craig S. Nelson
Mailing Address 5517 N. Military Trail, #910
City Boca Raton State FL Zip Code 33496
FEC ID number of contributing federal political committee. **C**
Name of Employer Robb & Stucky Occupation general manager
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00
Date of Receipt 10 / 17 / 2008
Transaction ID: C-4629-01Od05
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gordon L. Nelson
Mailing Address P.O. Box 2366
City Melbourne State FL Zip Code 32902
FEC ID number of contributing federal political committee. **C**
Name of Employer Florida Institute of Technology Occupation dean
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 10 / 20 / 2008
Transaction ID: C-4631-00oQ03
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 600.00
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: PAGE 36 / 151
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial) Burnell J. Oates		Date of Receipt MM / DD / YYYY 10 / 17 / 2008
Mailing Address 806 Julliard Court		Transaction ID: C-4738-00Hu0A
City Orlando	State FL	Zip Code 32828
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

B.

Full Name (Last, First, Middle Initial) Christopher J. Parker		Date of Receipt MM / DD / YYYY 10 / 23 / 2008
Mailing Address 520 Dean Creek Lane		Transaction ID: C-4832-023B05
City Orlando	State FL	Zip Code 32825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MPE	Occupation electrical engineer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 205.00	

C.

Full Name (Last, First, Middle Initial) Richard Parrillo		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address 150 W. Eugenie Terrace		Transaction ID: C-4841-02aC01
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer self-employed	Occupation insurance executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	2450.00
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: PAGE 37 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Gordon B. Pierce

Mailing Address 236 Morton Lane

City State Zip Code
Winter Springs FL 32708

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 8

Transaction ID: C-4991-01A60J

Amount of Each Receipt this Period
35.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Edward W. Poitras

Mailing Address P.O. Box 568821

City State Zip Code
Orlando FL 32856

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 0 8

Transaction ID: C-5025-02HY02

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James W. Poitras

Mailing Address P.O. Box 568821

City State Zip Code
Orlando FL 32856

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

Name of Employer Maury L. Carter & Assoc., Inc. Occupation director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 0 8

Transaction ID: C-5028-021b03

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1035.00**

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: PAGE 38 / 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Kay G. Poitras

Mailing Address P.O. Box 568821

City State Zip Code
Orlando FL 32856

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C-5030-02HZ02

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Patricia T. Poitras

Mailing Address P.O. Box 568821

City State Zip Code
Orlando FL 32856

FEC ID number of contributing federal political committee. C

Name of Employer Maury L. Carter & Assoc., Inc. Occupation director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C-5033-021a03

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
James D. Polly

Mailing Address 105 Secluded Way

City State Zip Code
Titusville FL 32780

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 425.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: C-5042-00VZ0A

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1100.00

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: PAGE 39 / 151

(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Vincent L. Preston

Mailing Address 6442 Longlake Drive

City State Zip Code
Port Orange FL 32128

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

550.00

Date of Receipt M M / D D / Y Y Y Y
10 / 20 / 2008

Transaction ID: C-5091-01Af0L

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
J. Stephen Pullum

Mailing Address 382 Vista Oak Drive

City State Zip Code
Longwood FL 34748

FEC ID number of contributing federal political committee. C

Name of Employer Pullum & Pullum, P.A. Occupation attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 16 / 2008

Transaction ID: C-5155-02Yg01

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 210 N. Goldenrod Road, #B10

City State Zip Code
Orlando FL 32807

FEC ID number of contributing federal political committee. C

Name of Employer Raad-Tannous Engineering, Inc. Occupation engineering

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt M M / D D / Y Y Y Y
10 / 24 / 2008

Transaction ID: C-5170-02Zh02

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1550.00

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: PAGE 40 / 151

(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Philip H. Ray

Mailing Address 1432 Mt. Laurel Drive

City State Zip Code
Winter Springs FL 32708

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

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

Transaction ID: C-5233-02Ok03

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Roberta Ray

Mailing Address 2048 Alaqua Lakes Blvd.

City State Zip Code
Lake Mary FL 32779

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt

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

Transaction ID: C-5237-02S304

Amount of Each Receipt this Period

500.00

auto use

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Roberta Ray

Mailing Address 2048 Alaqua Lakes Blvd.

City State Zip Code
Lake Mary FL 32779

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt

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

Transaction ID: C-5238-02S305

Amount of Each Receipt this Period

500.00

auto use

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1100.00

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: PAGE 41 / 151
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

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

Mailing Address 810 S. Ocean Blvd.

City State Zip Code
Palm Beach FL 33480

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

Name of Employer self-employed Occupation consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
50.00

Transaction ID: C-5325-01xe06

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Nina Rosenwald

Mailing Address 666 Third Avenue, 29th Floor

City State Zip Code
New York NY 10017

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

Name of Employer American Securities Occupation investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
1000.00

Transaction ID: C-5464-02az01

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Dwight D. Saathoff

Mailing Address 5535 Osprey Isle Lane

City State Zip Code
Orlando FL 32819

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

Name of Employer Ankerman, Senterfitt, & Eidson Occupation attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
250.00

Transaction ID: C-5537-02ZG01

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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: PAGE 42 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Lewis A. Seifert

Mailing Address 640 W. Palm Valley Drive

City Oviedo State FL Zip Code 32765

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

Name of Employer Advantist Health System Occupation hospital finance

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt 10 / 21 / 2008
Transaction ID: C-5658-01Ey07
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Danny D. Sharp

Mailing Address 3440 Heron Lane

City Titusville State FL Zip Code 32780

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2008
Transaction ID: C-5698-01wz03
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
W. Charles Shuffield

Mailing Address 2307 Lakeside Drive

City Orlando State FL Zip Code 32803

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

Name of Employer Shuffield & Lowman, P.A. Occupation attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2008
Transaction ID: C-5755-02ZC01
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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: PAGE 43 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
David Sigalow
Mailing Address 871 Brightwater Circle
City Maitland State FL Zip Code 32751
FEC ID number of contributing federal political committee. **C**
Name of Employer Allen Dyer Occupation attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 27 / 2008
Transaction ID: C-5770-02Zn01
Amount of Each Receipt this Period 300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bernie W. Simpkins
Mailing Address 110 S. Twin Lakes Road
City Cocoa State FL Zip Code 32926
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 16 / 2008
Transaction ID: C-5785-00kW07
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ralph D. Singleton
Mailing Address 529 Versailles Drive, #200
City Maitland State FL Zip Code 32751
FEC ID number of contributing federal political committee. **C**
Name of Employer Central Meridian Occupation developer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 21 / 2008
Transaction ID: C-5790-02ZF01
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1300.00
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: PAGE 44 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
S. Avery Smith

Mailing Address 2859 Willow Bay Terrace

City State Zip Code
Casselberry FL 32707

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

Name of Employer self-employed Occupation attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-5860-01Vd04

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

3800.00

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

Mailing Address 905 Ponte Verde Blvd.

City State Zip Code
Ponte Vedra Beach FL 32082

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

Name of Employer n/a Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C-6070-00YO05

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

650.00

C. Full Name (Last, First, Middle Initial)
Cary P. Swindle

Mailing Address 1707 Temple Drive

City State Zip Code
Winter Park FL 32789

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

Name of Employer self-employed Occupation farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C-6090-01ww03

Amount of Each Receipt this Period
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

225.00

SUBTOTAL of Receipts This Page (optional) ► **2575.00**

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: PAGE 45 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Robert B. Thomson

Mailing Address 4019 N. Chesterbrook Road

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
American Express vice-president

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C-6180-02aJ01

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
G. Andrew Tucker

Mailing Address 4125 S. Fiske Blvd.

City State Zip Code
Rockledge FL 32955

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

Name of Employer Occupation
G. A. Tucker & Sons cattle

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 8

Transaction ID: C-6287-00fs0C

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael K. Ungerman

Mailing Address 2977 Erkstin Drive

City State Zip Code
Oviedo FL 32765

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

Name of Employer Occupation
n/a retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: C-6330-024i06

Amount of Each Receipt this Period
700.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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: PAGE 46 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Sid Vihlen
Mailing Address 418 River Drive
City Debarry State FL Zip Code 32713
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation real estate investor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00
Date of Receipt 10 / 20 / 2008
Transaction ID: C-6425-013x0D
Amount of Each Receipt this Period 15.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Barry S. Weinstock
Mailing Address 1284 Preserve Point Drive
City Winter Park State FL Zip Code 32789
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation physician
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-6577-02Zo01
Amount of Each Receipt this Period 300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Marion G. Wells
Mailing Address 2100 South Ocean Drive, #4G
City Fort Lauderdale State FL Zip Code 33316
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 10 / 16 / 2008
Transaction ID: C-6598-011q02
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1315.00
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: PAGE 47 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Thomas M. Willoughby
Mailing Address 1003 Means Court
City Oviedo State FL Zip Code 32765
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 10 / 16 / 2008
Transaction ID: C-6706-02Yf01
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Daniel Wolfe
Mailing Address 659 Plantation Drive
City Titusville State FL Zip Code 32780
FEC ID number of contributing federal political committee. **C**
Name of Employer Power Solutions Occupation c.e.o.
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 800.00
Date of Receipt 10 / 17 / 2008
Transaction ID: C-6761-01o107
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Benjamin E. Wright
Mailing Address 275 Salvador Square
City Winter Park State FL Zip Code 32789
FEC ID number of contributing federal political committee. **C**
Name of Employer Benjamin Wright, P.A. Occupation president
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-6794-00yS04
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 450.00
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: PAGE 48 / 151
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Cindy R. Youell		Date of Receipt
	Mailing Address 351 Prima Vera Cove		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Altamonte Springs	FL	32714
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer n/a		Occupation homemaker	Transaction ID: C-6829-012B05
Receipt For: 2008		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	<input type="text" value="200.00"/>	
		<input type="text" value="500.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Robert J. Zuleeg		Date of Receipt
	Mailing Address 1455 Lake Berge Road		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Orlando	FL	32825
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer n/a		Occupation retired	Transaction ID: C-6867-00HT0H
Receipt For: 2008		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼	<input type="text" value="100.00"/>	
		<input type="text" value="700.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="62781.40"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Akerman, Senterfitt & Eidson, P.A. PAC

Mailing Address 255 S. Orange Avenue

City State Zip Code
Orlando FL 32802

FEC ID number of contributing federal political committee. **C** C00280008

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-78-00Ta09

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Allied Pilots Association PAC

Mailing Address 14600 Trinity Blvd., #500

City State Zip Code
Fort Worth TX 76155

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-108-02a701

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Association of Orthodontists PAC

Mailing Address 401 N. Lindbergh Blvd.

City State Zip Code
St. Louis MO 63141

FEC ID number of contributing federal political committee. **C** C00293910

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-131-02ad01

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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: PAGE 50 / 151

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
American Council of Life Insurers PAC

Mailing Address 1001 Pennsylvania Avenue, N.W.

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. C C00147066

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C-145-00mW04

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 919 18th Street, N.W.

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. C C00038604

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 0 8

Transaction ID: C-161-01Jk0E

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 325 7th Street, N.W.

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. C C00106146

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C-164-017w06

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2500.00

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: PAGE 51 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
American Osteopathic Information Assn. PAC
Mailing Address 1090 Vermont Avenue, N.W., #510

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: C-175-02bN01
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Supply Association PAC
Mailing Address 222 Merchandise Mart Plaza, #1360

City State Zip Code
Chicago IL 60654

FEC ID number of contributing federal political committee. **C** C00166074

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: C-182-02ZN01
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Amer. Nationwide Ded. to Electing Rep.
Mailing Address P.O. Box 523383

City State Zip Code
Springfield VA 22152

FEC ID number of contributing federal political committee. **C** C00375378

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

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

Transaction ID: C-184-02aB01
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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: PAGE 52 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Americans for Legal Immigration PAC
Mailing Address P.O. Box 30966

City Raleigh State NC Zip Code 27622

FEC ID number of contributing federal political committee. **C** C00405878

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: C-185-02aL01
 Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt: 10 / 20 / 2008
Transaction ID: C-254-02Q908
 Amount of Each Receipt this Period: 125.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

C. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: C-255-02Q90A
 Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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: PAGE 53 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund

Mailing Address 1800 N. Kent Street, #1070

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C-256-02Q90B

Amount of Each Receipt this Period
30.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

B. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund

Mailing Address 1800 N. Kent Street, #1070

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C-257-02Q90C

Amount of Each Receipt this Period
105.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

C. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund

Mailing Address 1800 N. Kent Street, #1070

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 8

Transaction ID: C-258-02Q90D

Amount of Each Receipt this Period
35.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmark received

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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: PAGE 54 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt

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

Transaction ID: C-259-02Q90E
 Amount of Each Receipt this Period 275.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

B. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt

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

Transaction ID: C-260-02Q90F
 Amount of Each Receipt this Period 105.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

C. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2740.00

Date of Receipt

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

Transaction ID: C-261-02Q90G
 Amount of Each Receipt this Period 1585.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

SUBTOTAL of Receipts This Page (optional) ► 0.00

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: PAGE 55 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070
City Arlington State VA Zip Code 22209
FEC ID number of contributing federal political committee. **C** C00332296
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2740.00
Date of Receipt 11 / 04 / 2008
Transaction ID: C-262-02Q90H
Amount of Each Receipt this Period 5.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmark received

B. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund
Mailing Address 1800 N. Kent Street, #1070
City Arlington State VA Zip Code 22209
FEC ID number of contributing federal political committee. **C** C00375865
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3500.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-263-02aT01
Amount of Each Receipt this Period 3500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Assn. of Progressive Rental Orgs. PAC
Mailing Address 1504 Robin Hood Trail, #220
City Austin State TX Zip Code 78703
FEC ID number of contributing federal political committee. **C** C00166223
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 10 / 27 / 2008
Transaction ID: C-304-02a801
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00
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: PAGE 56 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Bacardi USA, Inc. PAC
Mailing Address 2100 Biscayne Blvd.
City State Zip Code
Miami FL 33137
FEC ID number of contributing federal political committee. **C** C00160838
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt: 10 / 16 / 2008
Transaction ID: C-330-01W203
Amount of Each Receipt this Period: 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ball Corporation PAC
Mailing Address 10 Longs Peak Drive
City State Zip Code
Broomfield CO 80021
FEC ID number of contributing federal political committee. **C** C00039461
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt: 10 / 23 / 2008
Transaction ID: C-369-01m004
Amount of Each Receipt this Period: 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Boeing Political Action Committee
Mailing Address 1200 Wilson Boulevard
City State Zip Code
Arlington VA 22209
FEC ID number of contributing federal political committee. **C** C00142711
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00
Date of Receipt: 10 / 24 / 2008
Transaction ID: C-661-01860D
Amount of Each Receipt this Period: 1500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
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: PAGE 57 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
CNL Financial Group, Inc. PAC

Mailing Address 450 S. Orange Avenue, #1400

City State Zip Code
Orlando FL 32801

FEC ID number of contributing federal political committee. **C** C00454314

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-958-02Zd01

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CSX Corporation Good Govt. Fund

Mailing Address 1331 Pennsylvania Ave., N.W., #560

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C-963-006C0D

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Campaign for Working Families

Mailing Address 2800 S. Shirlington Road, #605

City State Zip Code
Arlington VA 22206

FEC ID number of contributing federal political committee. **C** C00325076

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C-1007-00mS04

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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: PAGE 58 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Capital One Financial Assn. Political Fund
Mailing Address 1680 Capital One Drive

City State Zip Code
McLean VA 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: C-1024-017108

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
The Caterpillar Employee PAC
Mailing Address 100 N.E. Adams Street

City State Zip Code
Peoria IL 61629

FEC ID number of contributing federal political committee. **C** C00148031

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 8

Transaction ID: C-1105-022M03

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Citizens United Political Victory Fund
Mailing Address 1006 Pennsylvania Avenue, S.E.

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: C-1182-02at01

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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: PAGE 59 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC

Mailing Address 1776 K Street, #300

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2114.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-1213-000J01

Amount of Each Receipt this Period
202.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

B. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC

Mailing Address 1776 K Street, #300

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2114.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-1214-000J0m

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

C. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC

Mailing Address 1776 K Street, #300

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2114.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-1215-000J0n

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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: PAGE 60 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC
Mailing Address 1776 K Street, #300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2114.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: C-1216-000J0o
 Amount of Each Receipt this Period: 10.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmark received

B. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC
Mailing Address 1776 K Street, #300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2114.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: C-1217-000J0p
 Amount of Each Receipt this Period: 852.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

C. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC
Mailing Address 1776 K Street, #300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 675.00

Date of Receipt: 11 / 21 / 2008
Transaction ID: C-1218-000J0q
 Amount of Each Receipt this Period: 275.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

SUBTOTAL of Receipts This Page (optional) ► 0.00

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: PAGE 61 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC

Mailing Address 1776 K Street, #300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 675.00

Date of Receipt: 11 / 21 / 2008
Transaction ID: C-1219-000J0r
Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

B. Full Name (Last, First, Middle Initial)
Club for Growth, Inc. PAC

Mailing Address 1776 K Street, #300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 675.00

Date of Receipt: 11 / 21 / 2008
Transaction ID: C-1220-000J0s
Amount of Each Receipt this Period: 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

C. Full Name (Last, First, Middle Initial)
Computer Sciences Corp. PAC

Mailing Address 2199 E. Grand Avenue

City El Segundo State CA Zip Code 90245

FEC ID number of contributing federal political committee. **C** C00101410

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 11 / 03 / 2008
Transaction ID: C-1298-017407
Amount of Each Receipt this Period: 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00375865

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5833.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: C-1322-02Mn0K

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

B. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00375865

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5833.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C-1323-02Mn0L

Amount of Each Receipt this Period
65.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

C. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00375865

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5833.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: C-1324-02Mn0M

Amount of Each Receipt this Period
20.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmark received

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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: PAGE 63 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00375865

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5833.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: C-1325-02Mn0N

Amount of Each Receipt this Period
80.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

B. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00375865

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5833.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 8

Transaction ID: C-1326-02Mn0O

Amount of Each Receipt this Period
123.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

C. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680

City State Zip Code
Washington DC 20035

FEC ID number of contributing federal political committee. **C** C00375865

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5833.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 8

Transaction ID: C-1327-02Mn0P

Amount of Each Receipt this Period
495.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmarks received

SUBTOTAL of Receipts This Page (optional) ► 0.00

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
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FOR LINE NUMBER: PAGE 64 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680
City Washington State DC Zip Code 20035
FEC ID number of contributing federal political committee. **C** C00375865
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 45.00
Date of Receipt 11 / 21 / 2008
Transaction ID: C-1328-02Mn0Q
Amount of Each Receipt this Period 25.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

B. Full Name (Last, First, Middle Initial)
Concerned Women for America PAC
Mailing Address P.O. Box 66680
City Washington State DC Zip Code 20035
FEC ID number of contributing federal political committee. **C** C00375865
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 45.00
Date of Receipt 11 / 21 / 2008
Transaction ID: C-1329-02Mn0R
Amount of Each Receipt this Period 20.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

C. Full Name (Last, First, Middle Initial)
Conservative Victory Fund
Mailing Address 104 N. Carolina S. E.
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00009704
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2407.15
Date of Receipt 10 / 17 / 2008
Transaction ID: C-1359-00g70J
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 500.00
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
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Dallas Safari Club PAC
Mailing Address 310 South Ross
City State Zip Code
Mexia TX 76667
FEC ID number of contributing federal political committee. **C** C00356477
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 8
Transaction ID: C-1504-02YI01
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Deloitte Federal PAC
Mailing Address P.O. Box 365
City State Zip Code
Washington DC 20044
FEC ID number of contributing federal political committee. **C** C00211318
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 0 8
Transaction ID: C-1624-02XZ03
Amount of Each Receipt this Period
2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Exxon Mobil Corporation PAC
Mailing Address 325 Pennsylvania Ave., S.E., #280
City State Zip Code
Washington DC 20003
FEC ID number of contributing federal political committee. **C** C00121368
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8
Transaction ID: C-1970-02GU03
Amount of Each Receipt this Period
2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5500.00
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: PAGE 66 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Florida Farm Bureau Fed. PAC

Mailing Address P. O. Box 147030

City State Zip Code
Gainesville FL 32614

FEC ID number of contributing federal political committee. **C** C00283572

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: C-2181-005N04

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Louie Gohmert to Congress Committee

Mailing Address P.O. Box 8060

City State Zip Code
Tyler TX 75711

FEC ID number of contributing federal political committee. **C** C00386532

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-2454-02aA01

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gun Owners of Amer. Pol. Victory Fund

Mailing Address 8001 Forbes Place, #102

City State Zip Code
Springfield VA 22151

FEC ID number of contributing federal political committee. **C** C00278101

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C-2587-00ma03

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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: PAGE 67 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Harleysville Group, Inc. Federal PAC

Mailing Address 355 Maple Avenue

City State Zip Code
Harleysville PA 19438

FEC ID number of contributing federal political committee. **C** C00123950

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C-2710-02ZT01

Amount of Each Receipt this Period
3500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Holland & Knight Comm. for Eff. Govt.

Mailing Address 2099 Pennsylvania Ave., NW, #100

City State Zip Code
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 0 8

Transaction ID: C-2939-00iK08

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
IPAA Wildcatters Fund

Mailing Address 1201 15th Street, N.W., #300

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C-3099-02a901

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **9500.00**

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: PAGE 68 / 151

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Intl. Council of Shopping Centers, Inc PAC

Mailing Address 1399 New York Avenue, #720

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00217638

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C-3122-01YW02

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Iranian American PAC

Mailing Address 1350 Connecticut Ave., N.W., #202

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00382028

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: C-3132-01h802

Amount of Each Receipt this Period

2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
MAPPS PAC

Mailing Address 1760 Reston Parkway, #315

City State Zip Code
Reston VA 20190

FEC ID number of contributing federal political committee. **C** C00233247

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: C-3908-01r903

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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: PAGE 69 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Manufactured Housing Inst. PAC

Mailing Address 2101 Wilson Blvd., #610

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00043463

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 10 / 25 / 2008
Transaction ID: C-3943-009A0F

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mass. Mutual Life Ins. Co. PAC

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 10 / 27 / 2008
Transaction ID: C-4012-011y0A

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Conservative Campaign Fund

Mailing Address 1 Massachusetts Ave., N.W., #630

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00348359

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 10 / 20 / 2008
Transaction ID: C-4579-00ut06

Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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: PAGE 70 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC
Mailing Address 1125 Executive Circle

City Irving State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 10 / 22 / 2008
Transaction ID: C-4582-02Fz03
 Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Pro-Life Alliance PAC
Mailing Address 4521 Windsor Farms Court

City Annandale State VA Zip Code 22003

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 10 / 27 / 2008
Transaction ID: C-4593-013904
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
POWERPAC of the Edison Electric Inst.
Mailing Address 701 Pennsylvania Avenue, N.W.

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 28 / 2008
Transaction ID: C-4799-02XY02
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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: PAGE 71 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Pharmaceutical Research & Manufacturers
Mailing Address 950 F Street, N.W., #300
City Washington State DC Zip Code 20004
FEC ID number of contributing federal political committee. **C** C00021972
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 10 / 20 / 2008
Transaction ID: C-4962-02ZO01
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Principles Exalt a Nation PAC
Mailing Address P.O. Box 1131
City Anderson State IN Zip Code 46015
FEC ID number of contributing federal political committee. **C** C00383927
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt: 10 / 20 / 2008
Transaction ID: C-5114-01mB02
Amount of Each Receipt this Period: 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Property Casualty Insurers Asso. PAC
Mailing Address 2600 S. River Road
City Des Plaines State IL Zip Code 60018
FEC ID number of contributing federal political committee. **C** C00066472
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 9500.00
Date of Receipt: 10 / 20 / 2008
Transaction ID: C-5137-01Ks0D
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
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: PAGE 72 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Publix Super Markets, Inc. Associates PAC

Mailing Address P.O. Box 407

City State Zip Code
Lakeland FL 33802

FEC ID number of contributing federal political committee. **C** C00400705

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 7 / 2 0 0 8

Transaction ID: C-5149-02S702

Amount of Each Receipt this Period
3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Republican Jewish Coalition PAC

Mailing Address 50 F Street, N.W., #100

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00345132

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 8

Transaction ID: C-5312-02ag01

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
 earmark received

C. Full Name (Last, First, Middle Initial)
Republican Liberty Caucus PAC

Mailing Address P.O. Box 692672

City State Zip Code
Quincy MA 02269

FEC ID number of contributing federal political committee. **C** C00269241

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 8

Transaction ID: C-5314-02Yc02

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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: PAGE 73 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Republican Majority Campaign
Mailing Address 13421 Malena Drive

City State Zip Code
Santa Ana CA 92705

FEC ID number of contributing federal political committee. **C** C00442319

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: C-5315-02av01

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Republican Member Senate Fund
Mailing Address 8801 Lehman

City State Zip Code
Montague MI 49437

FEC ID number of contributing federal political committee. **C** C00413872

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 8

Transaction ID: C-5316-02ZL01

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Roche, Inc. Good Government Fund
Mailing Address 340 Kingsland Street

City State Zip Code
Nutley NJ 07110

FEC ID number of contributing federal political committee. **C** C00072769

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 8

Transaction ID: C-5422-025Y02

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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: PAGE 74 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Hal Rogers for Congress
Mailing Address P.O. Box 1214
City Somerset State KY Zip Code 42502
FEC ID number of contributing federal political committee. **C** C00116632
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2008.00
Date of Receipt: 10 / 16 / 2008
Transaction ID: C-5436-02Yh01
Amount of Each Receipt this Period: 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Slatecard.com PAC
Mailing Address 228 S. Washington Street, #115
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00438549
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 165.00
Date of Receipt: 11 / 03 / 2008
Transaction ID: C-5817-02NI08
Amount of Each Receipt this Period: 25.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
earmarks received

C. Full Name (Last, First, Middle Initial)
Trust in Small Business PAC
Mailing Address P.O. Box 1172
City Alexandria State VA Zip Code 22313
FEC ID number of contributing federal political committee. **C** C00423095
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 10 / 24 / 2008
Transaction ID: C-6280-02Ze01
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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: PAGE 75 / 151
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
UBS Americas Fund for Better Government
Mailing Address 400 Atlantic Street
City State Zip Code
Stamford CT 06901
FEC ID number of contributing federal political committee. **C** C00012245
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt: 11 / 03 / 2008
Transaction ID: C-6314-02bO01
Amount of Each Receipt this Period: 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Walt Disney Co. Employees PAC
Mailing Address 1150 17th Street, N.W., #400
City State Zip Code
Washington DC 20036
FEC ID number of contributing federal political committee. **C** C00197749
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00
Date of Receipt: 10 / 20 / 2008
Transaction ID: C-6500-00Td0D
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Wendy's/Arby's Group, Inc. PAC
Mailing Address 4288 W. Dublin Granville Road
City State Zip Code
Dublin OH 43017
FEC ID number of contributing federal political committee. **C** C00369090
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 10 / 20 / 2008
Transaction ID: C-6606-02ZM01
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7000.00
TOTAL This Period (last page this line number only) ► 92250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

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

Mailing Address P. O. Box 1

City State Zip Code
Tampa FL 33601

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
13547.90

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: C-401-00711L

Amount of Each Receipt this Period
594.99

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	594.99
TOTAL This Period (last page this line number only)	▶	594.99

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 151
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
State Farm Insurance

Mailing Address 7620 Lake Underhill Road

City State Zip Code
Orlando FL 32822

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
188.66

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: C-5985-02RD01

Amount of Each Receipt this Period
188.66

refund insurance

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	188.66
TOTAL This Period (last page this line number only)	▶	188.66

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

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

Mailing Address P. O. Box 78522

City Phoenix State AZ Zip Code 85062

Purpose of Disbursement telephone

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D66-000B1f
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

179.64

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Jon R. Abrams

Mailing Address 9036 Sandwood Way

City Orlando State FL Zip Code 32832

Purpose of Disbursement salary

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D69-02XK02
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

1347.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Jon R. Abrams

Mailing Address 9036 Sandwood Way

City Orlando State FL Zip Code 32832

Purpose of Disbursement travel

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D70-02XK03
Date of Disbursement

11 / 13 / 2008

Amount of Each Disbursement this Period

374.94

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1901.58

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Bank of Tampa Mailing Address P. O. Box 1 City Tampa State FL Zip Code 33601 Purpose of Disbursement service charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D215-00711u Date of Disbursement 10 / 23 / 2008 Amount of Each Disbursement this Period 18.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bank of Tampa Mailing Address P. O. Box 1 City Tampa State FL Zip Code 33601 Purpose of Disbursement service charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D216-00711v Date of Disbursement 10 / 28 / 2008 Amount of Each Disbursement this Period 18.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bank of Tampa Mailing Address P. O. Box 1 City Tampa State FL Zip Code 33601 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D217-00711w Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 1421.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1457.62

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

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

Mailing Address P. O. Box 1

City Tampa State FL Zip Code 33601

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D218-00711x
Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

8.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

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

Mailing Address P. O. Box 1

City Tampa State FL Zip Code 33601

Purpose of Disbursement
payroll taxes

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D219-00711y
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

6462.91

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Bellwether Consulting Group

Mailing Address P.O. Box 1253

City Oakland State FL Zip Code 34760

Purpose of Disbursement
fundraising consulting

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D290-01rB0z
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

10618.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

17088.91

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: D291-01rB10 Date of Disbursement
	Mailing Address P.O. Box 1253	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Oakland State FL Zip Code 34760	Amount of Each Disbursement this Period
	Purpose of Disbursement fundraising consulting	<input type="text" value="2604.41"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: D292-01rB11 Date of Disbursement
	Mailing Address P.O. Box 1253	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Oakland State FL Zip Code 34760	Amount of Each Disbursement this Period
	Purpose of Disbursement delivery	<input type="text" value="92.21"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group	Transaction ID: D293-01rB12 Date of Disbursement
	Mailing Address P.O. Box 1253	<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Oakland State FL Zip Code 34760	Amount of Each Disbursement this Period
	Purpose of Disbursement delivery	<input type="text" value="18.85"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2715.47"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Bellwether Consulting Group Mailing Address P.O. Box 1253 City Oakland State FL Zip Code 34760 Purpose of Disbursement catering/delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D294-01rB13 Date of Disbursement 11 / 24 / 2008 Amount of Each Disbursement this Period 518.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Jessica L. Brien Mailing Address 3318 Raeford Road City Orlando State FL Zip Code 32806 Purpose of Disbursement see memo entries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D340-02PC0B Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 381.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) City of New Smyrna Beach Mailing Address 210 Sams Avenue City New Smyrna Beach State FL Zip Code 32168 Purpose of Disbursement sign bond Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1-00oI02 Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Memo

SUBTOTAL of Disbursements This Page (optional) ▶	899.96
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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

<p>A. Full Name (Last, First, Middle Initial) Friends of the NRA</p> <p>Mailing Address 11250 Waples Mill Road</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement dinner tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D2-00li08</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 45.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Memo</p>
<p>B. Full Name (Last, First, Middle Initial) Publix</p> <p>Mailing Address P.O. Box 407</p> <p>City Lakeland State FL Zip Code 33802</p> <p>Purpose of Disbursement food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D3-01QO0P</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 28.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Memo</p>
<p>C. Full Name (Last, First, Middle Initial) Publix</p> <p>Mailing Address P.O. Box 407</p> <p>City Lakeland State FL Zip Code 33802</p> <p>Purpose of Disbursement food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D4-01QO0Q</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 27.53</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Memo</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City State Zip Code
Des Moines IA 50368

Purpose of Disbursement
office supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D5-002n1H
Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

B.

Full Name (Last, First, Middle Initial)
Jessica L. Brien

Mailing Address 3318 Raeford Road

City State Zip Code
Orlando FL 32806

Purpose of Disbursement
salary
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D341-02PC0C
Date of Disbursement

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

Amount of Each Disbursement this Period

1150.17

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Jessica L. Brien

Mailing Address 3318 Raeford Road

City State Zip Code
Orlando FL 32806

Purpose of Disbursement
see memo entries
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D342-02PC0D
Date of Disbursement

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

Amount of Each Disbursement this Period

254.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1404.17

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City State Zip Code
Des Moines IA 50368

Purpose of Disbursement
office supplies
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D1-002n1E
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

237.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

B.

Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address 83 Geneva Drive

City State Zip Code
Oviedo FL 32765

Purpose of Disbursement
postage
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D2-000S3h
Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

16.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

C.

Full Name (Last, First, Middle Initial)
Jessica L. Brien

Mailing Address 3318 Raeford Road

City State Zip Code
Orlando FL 32806

Purpose of Disbursement
see memo entries
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D343-02PC0E
Date of Disbursement

11 / 05 / 2008

Amount of Each Disbursement this Period

705.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

705.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: D2-01p90k Date of Disbursement 10 / 29 / 2008
	Mailing Address P. O. Box 94515	Amount of Each Disbursement this Period 28.64
	City Palatine State IL Zip Code 60094	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement delivery	[MEMO ITEM] Memo
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Little Caesars	Transaction ID: D3-02X106 Date of Disbursement 11 / 01 / 2008
	Mailing Address 2200 Winter Springs Blvd., #107	Amount of Each Disbursement this Period 107.00
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage	[MEMO ITEM] Memo
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Orlando Reg. Chamber of Commerce	Transaction ID: D4-00ni06 Date of Disbursement 10 / 30 / 2008
	Mailing Address P. O. Box 1234	Amount of Each Disbursement this Period 225.00
	City Orlando State FL Zip Code 32802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement dinner ticket	[MEMO ITEM] Memo
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Publix	Transaction ID: D5-01QO0M Date of Disbursement 10 / 31 / 2008
	Mailing Address P.O. Box 407	Amount of Each Disbursement this Period 26.70
	City Lakeland State FL Zip Code 33802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage Candidate Name	[MEMO ITEM] Memo
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Publix	Transaction ID: D6-01QO0N Date of Disbursement 11 / 01 / 2008
	Mailing Address P.O. Box 407	Amount of Each Disbursement this Period 11.97
	City Lakeland State FL Zip Code 33802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage Candidate Name	[MEMO ITEM] Memo
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Publix	Transaction ID: D7-01QO0O Date of Disbursement 11 / 01 / 2008
	Mailing Address P.O. Box 407	Amount of Each Disbursement this Period 47.14
	City Lakeland State FL Zip Code 33802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage Candidate Name	[MEMO ITEM] Memo
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D8-002n1F
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

41.72

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D9-002n1G
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

113.41

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

C.

Full Name (Last, First, Middle Initial)
Wal-Mart Super Center

Mailing Address 11250 E. Colonial Drive

City Orlando State FL Zip Code 32817

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D12-01JH08
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

49.22

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Jessica L. Brien

Mailing Address 3318 Raeford Road

City Orlando State FL Zip Code 32806

Purpose of Disbursement salary
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D344-02PC0F
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

575.09

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Bright House Networks

Mailing Address P.O. Box 31337

City Tampa State FL Zip Code 33631

Purpose of Disbursement cable
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D346-02WG02
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

62.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Campaign Graphics

Mailing Address P. O. Box 4859

City Ocala State FL Zip Code 34478

Purpose of Disbursement yard signs
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D373-00Er0F
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

3493.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4130.44

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Campaign Solutions

Mailing Address 118 N. St. Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D398-00Dy1E
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

1135.42

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 118 N. St. Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement service charge

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D399-00Dy1G
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

25.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 118 N. St. Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D400-00Dy1H
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

1114.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2275.12

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) ChristMas Printing, Inc. Mailing Address P. O. Box 604 City Christmas State FL Zip Code 32709 Purpose of Disbursement printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D525-01QT1J Date of Disbursement 11 / 24 / 2008 Amount of Each Disbursement this Period 2136.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) City of Oviedo Mailing Address 400 Alexandria Blvd. City Oviedo State FL Zip Code 32765 Purpose of Disbursement utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D541-01GA05 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 33.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Karen L. Clancy Mailing Address 811 13th Avenue City New Smyrna Beach State FL Zip Code 32169 Purpose of Disbursement travel/office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D549-02W403 Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 188.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2358.10

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Karen L. Clancy <hr/> Mailing Address 811 13th Avenue <hr/> City New Smyrna Beach State FL Zip Code 32169 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D550-02W404 Date of Disbursement 10 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 892.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Karen L. Clancy <hr/> Mailing Address 811 13th Avenue <hr/> City New Smyrna Beach State FL Zip Code 32169 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D551-02W405 Date of Disbursement 11 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 446.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Karen L. Clancy <hr/> Mailing Address 811 13th Avenue <hr/> City New Smyrna Beach State FL Zip Code 32169 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D552-02W406 Date of Disbursement 11 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 1347.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2686.31

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Dunhill Management Corp. Mailing Address 520 N. Semoran Blvd., #222 City Orlando State FL Zip Code 32807 Purpose of Disbursement office rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D634-02LE02 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 9073.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Election Connections, Inc. Mailing Address P.O. Box 10866 City Tallahassee State FL Zip Code 32302 Purpose of Disbursement telephone calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D654-02WJ08 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 6162.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Election Connections, Inc. Mailing Address P.O. Box 10866 City Tallahassee State FL Zip Code 32302 Purpose of Disbursement telephone calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D655-02WJ09 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 545.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	15781.52
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Election Connections, Inc. Mailing Address P.O. Box 10866 City Tallahassee State FL Zip Code 32302 Purpose of Disbursement telephone calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D656-02WJ0A Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 10460.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Election Connections, Inc. Mailing Address P.O. Box 10866 City Tallahassee State FL Zip Code 32302 Purpose of Disbursement telephone calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D657-02WJ0B Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 1922.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) FTI Consulting, Inc. Mailing Address 1101 K Street, N.W. City Washington State DC Zip Code 20005 Purpose of Disbursement file processing/hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D681-01q00A Date of Disbursement 11 / 14 / 2008 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	15382.72
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: D729-01p90g Date of Disbursement 10 / 22 / 2008
	Mailing Address P. O. Box 94515	Amount of Each Disbursement this Period 40.08
	City Palatine State IL Zip Code 60094	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement delivery Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: D730-01p90h Date of Disbursement 11 / 03 / 2008
	Mailing Address P. O. Box 94515	Amount of Each Disbursement this Period 23.07
	City Palatine State IL Zip Code 60094	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement delivery Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Federal Strategy Group, LLC	Transaction ID: D744-02bd01 Date of Disbursement 11 / 13 / 2008
	Mailing Address P.O. Box 10570	Amount of Each Disbursement this Period 833.71
	City Tallahassee State FL Zip Code 32302	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	896.86
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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Federal Strategy Group, LLC Mailing Address P.O. Box 10570 City Tallahassee State FL Zip Code 32302 Purpose of Disbursement campaign consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D745-02bd02 Date of Disbursement 11 / 13 / 2008 Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Scott Howell & Company, LP Mailing Address 208 N. Market Street, #225 City Dallas State TX Zip Code 75202 Purpose of Disbursement media placement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D882-02Uk04 Date of Disbursement 10 / 16 / 2008 Amount of Each Disbursement this Period 225700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Scott Howell & Company, LP Mailing Address 208 N. Market Street, #225 City Dallas State TX Zip Code 75202 Purpose of Disbursement media placement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D883-02Uk04 Date of Disbursement 10 / 23 / 2008 Amount of Each Disbursement this Period 180250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

415950.00

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Scott Howell & Company, LP

Transaction ID: D884-02Uk05
Date of Disbursement

Mailing Address 208 N. Market Street, #225

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

City Dallas State TX Zip Code 75202

Amount of Each Disbursement this Period

14830.00

Purpose of Disbursement
media production
Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Carissa J. Lawhun

Transaction ID: D974-016Y1Y
Date of Disbursement

Mailing Address 5284 Rockinghorse Place

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

City Oviedo State FL Zip Code 32765

Amount of Each Disbursement this Period

1044.69

Purpose of Disbursement
salary
Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Carissa J. Lawhun

Transaction ID: D975-016Y1Z
Date of Disbursement

Mailing Address 5284 Rockinghorse Place

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

City Oviedo State FL Zip Code 32765

Amount of Each Disbursement this Period

1044.69

Purpose of Disbursement
salary
Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

16919.38

TOTAL This Period (last page this line number only)

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**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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Carissa J. Lawhun Mailing Address 5284 Rockinghorse Place City Oviedo State FL Zip Code 32765 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D976-016Y1a Date of Disbursement 11 / 14 / 2008 Amount of Each Disbursement this Period 3367.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Majority Strategies, Inc. Mailing Address 135 Professional Drive, #104 City Ponte Vedra Beach State FL Zip Code 32082 Purpose of Disbursement direct mail services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1012-02QI0D Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 315.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Majority Strategies, Inc. Mailing Address 135 Professional Drive, #104 City Ponte Vedra Beach State FL Zip Code 32082 Purpose of Disbursement direct mail services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1013-02QI0E Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 815.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	4498.70
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Majority Strategies, Inc.	Transaction ID: D1014-02QI0F Date of Disbursement
	Mailing Address 135 Professional Drive, #104	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City State Zip Code Ponte Vedra Beach FL 32082	Amount of Each Disbursement this Period
	Purpose of Disbursement direct mail services	<input type="text" value="4200.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Majority Strategies, Inc.	Transaction ID: D1015-02QI0G Date of Disbursement
	Mailing Address 135 Professional Drive, #104	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City State Zip Code Ponte Vedra Beach FL 32082	Amount of Each Disbursement this Period
	Purpose of Disbursement postage	<input type="text" value="5142.14"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Majority Strategies, Inc.	Transaction ID: D1016-02QI0H Date of Disbursement
	Mailing Address 135 Professional Drive, #104	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City State Zip Code Ponte Vedra Beach FL 32082	Amount of Each Disbursement this Period
	Purpose of Disbursement direct mail services	<input type="text" value="4200.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="13542.14"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Majority Strategies, Inc.

Transaction ID: D1017-02QI0I
Date of Disbursement

Mailing Address 135 Professional Drive, #104

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

City State Zip Code
Ponte Vedra Beach FL 32082

Amount of Each Disbursement this Period

703.92

Purpose of Disbursement
postage

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Majority Strategies, Inc.

Transaction ID: D1018-02QI0J
Date of Disbursement

Mailing Address 135 Professional Drive, #104

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

City State Zip Code
Ponte Vedra Beach FL 32082

Amount of Each Disbursement this Period

1310.78

Purpose of Disbursement
postage

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Majority Strategies, Inc.

Transaction ID: D1019-02QI0K
Date of Disbursement

Mailing Address 135 Professional Drive, #104

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

City State Zip Code
Ponte Vedra Beach FL 32082

Amount of Each Disbursement this Period

724.07

Purpose of Disbursement
postage

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2738.77

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

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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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Majority Strategies, Inc.

Transaction ID: D1020-02QI0L
Date of Disbursement

Mailing Address 135 Professional Drive, #104

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

City State Zip Code
Ponte Vedra Beach FL 32082

Amount of Each Disbursement this Period

633.16

Purpose of Disbursement
direct mail services

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Majority Strategies, Inc.

Transaction ID: D1021-02QI0M
Date of Disbursement

Mailing Address 135 Professional Drive, #104

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

City State Zip Code
Ponte Vedra Beach FL 32082

Amount of Each Disbursement this Period

977.97

Purpose of Disbursement
direct mail services

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Majority Strategies, Inc.

Transaction ID: D1022-02QI0N
Date of Disbursement

Mailing Address 135 Professional Drive, #104

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

City State Zip Code
Ponte Vedra Beach FL 32082

Amount of Each Disbursement this Period

3537.57

Purpose of Disbursement
direct mail services

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5148.70

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

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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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial) Majority Strategies, Inc. Mailing Address 135 Professional Drive, #104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement delivery Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1023-02QI00 Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 450.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
B. Full Name (Last, First, Middle Initial) Majority Strategies, Inc. Mailing Address 135 Professional Drive, #104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement direct mail services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1024-02QI0P Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 1645.25
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
C. Full Name (Last, First, Middle Initial) Majority Strategies, Inc. Mailing Address 135 Professional Drive, #104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement direct mail services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1025-02QI0Q Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 1230.90
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3326.15
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 103 / 151

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Majority Strategies, Inc. Mailing Address 135 Professional Drive, #104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement direct mail services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D1026-02QI0R Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 2380.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Greg Mesack Mailing Address 1101 16th Street, N.W., #400 City State Zip Code Washington DC 20036 Purpose of Disbursement * In-Kind->transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D1044-02cS01 Date of Disbursement 10 / 28 / 2008 Amount of Each Disbursement this Period 219.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Greg Mesack Mailing Address 1101 16th Street, N.W., #400 City State Zip Code Washington DC 20036 Purpose of Disbursement * In-Kind->transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D1045-02cS02 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 294.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2893.21

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Greg Mesack <hr/> Mailing Address 1101 16th Street, N.W., #400 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement * In-Kind->lodging Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1046-02cS03 Date of Disbursement 11 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 609.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Cheryl Moore <hr/> Mailing Address 17012 Oak Grove Hill Court <hr/> City Orlando State FL Zip Code 32820 <hr/> Purpose of Disbursement see memo entry Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1052-00050B Date of Disbursement 10 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 329.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address P. O. Box 9020 <hr/> City Des Moines State IA Zip Code 50368 <hr/> Purpose of Disbursement office equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1-002n1D Date of Disbursement 10 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 329.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Memo

SUBTOTAL of Disbursements This Page (optional) ▶	938.82
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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

<p>A. Full Name (Last, First, Middle Initial) Jim Oddie</p> <p>Mailing Address P.O. Box 291841</p> <p>City Port Orange State FL Zip Code 32129</p> <p>Purpose of Disbursement see memo entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D1119-02c001</p> <p>Date of Disbursement 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 282.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) 7-Eleven</p> <p>Mailing Address 207 Dunlawton Avenue</p> <p>City Port Orange State FL Zip Code 32127</p> <p>Purpose of Disbursement fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D1-01Pq03</p> <p>Date of Disbursement 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 85.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Memo</p>
<p>C. Full Name (Last, First, Middle Initial) 7-Eleven</p> <p>Mailing Address 207 Dunlawton Avenue</p> <p>City Port Orange State FL Zip Code 32127</p> <p>Purpose of Disbursement fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D2-01Pq04</p> <p>Date of Disbursement 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 80.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Memo</p>

SUBTOTAL of Disbursements This Page (optional) ▶

282.70

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
7-Eleven

Mailing Address 207 Dunlawton Avenue

City State Zip Code
Port Orange FL 32127

Purpose of Disbursement
fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D3-01Pq05
Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

61.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

B.

Full Name (Last, First, Middle Initial)
Palm Tree Computer Systems

Mailing Address 119 N. Central Avenue

City State Zip Code
Oviedo FL 32765

Purpose of Disbursement
tech support

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1183-021z07
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

191.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Patton Boggs, LLP

Mailing Address 2550 M Street, N.W.

City State Zip Code
Washington DC 20037

Purpose of Disbursement
legal services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1212-00FU0U
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

11000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

11191.48

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Pepper R. Pennington Mailing Address 281 Tiger Lily Court City Altamonte Springs State FL Zip Code 32714 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1223-01Zd0O Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 229.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Pepper R. Pennington Mailing Address 281 Tiger Lily Court City Altamonte Springs State FL Zip Code 32714 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1224-01Zd0P Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 1734.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Pepper R. Pennington Mailing Address 281 Tiger Lily Court City Altamonte Springs State FL Zip Code 32714 Purpose of Disbursement travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1225-01Zd0Q Date of Disbursement 11 / 05 / 2008 Amount of Each Disbursement this Period 267.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2230.34

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Pepper R. Pennington Mailing Address 281 Tiger Lily Court City Altamonte Springs State FL Zip Code 32714 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1226-01Zd0R Date of Disbursement 11 / 14 / 2008 Amount of Each Disbursement this Period 867.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Pepper R. Pennington Mailing Address 281 Tiger Lily Court City Altamonte Springs State FL Zip Code 32714 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1227-01Zd0S Date of Disbursement 11 / 14 / 2008 Amount of Each Disbursement this Period 3367.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Pepper R. Pennington Mailing Address 281 Tiger Lily Court City Altamonte Springs State FL Zip Code 32714 Purpose of Disbursement travel/photos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1228-01Zd0T Date of Disbursement 11 / 24 / 2008 Amount of Each Disbursement this Period 213.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	4447.52
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Petty Cash <hr/> Mailing Address 1420 Alafaya Trail, #103 <hr/> City Oviedo State FL Zip Code 32765 <hr/> Purpose of Disbursement petty cash-no item. req. Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D1256-00Ew11 Date of Disbursement 10 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 98.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Petty Cash <hr/> Mailing Address 1420 Alafaya Trail, #103 <hr/> City Oviedo State FL Zip Code 32765 <hr/> Purpose of Disbursement petty cash-no item. req. Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D1257-00Ew12 Date of Disbursement 10 / 29 / 2008 <hr/> Amount of Each Disbursement this Period 125.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Petty Cash <hr/> Mailing Address 1420 Alafaya Trail, #103 <hr/> City Oviedo State FL Zip Code 32765 <hr/> Purpose of Disbursement petty cash-no item. req. Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D1258-00Ew13 Date of Disbursement 11 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 82.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	307.38
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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Petty Cash Mailing Address 1420 Alafaya Trail, #103 City Oviedo State FL Zip Code 32765 Purpose of Disbursement petty cash-no item. req. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1259-00Ew14 Date of Disbursement 11 / 21 / 2008 Amount of Each Disbursement this Period 217.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Progress Energy Florida, Inc. Mailing Address P.O. Box 33199 City St. Petersburg State FL Zip Code 33733 Purpose of Disbursement utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1287-021r0E Date of Disbursement 10 / 22 / 2008 Amount of Each Disbursement this Period 21.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Progress Energy Florida, Inc. Mailing Address P.O. Box 33199 City St. Petersburg State FL Zip Code 33733 Purpose of Disbursement utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1288-021r0F Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 410.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	648.89
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 111 / 151

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Progress Energy Florida, Inc.

Transaction ID: D1289-021r0G
Date of Disbursement

Mailing Address P.O. Box 33199

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

City State Zip Code
St. Petersburg FL 33733

Amount of Each Disbursement this Period

21.41

Purpose of Disbursement
utilities

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Progress Energy Florida, Inc.

Transaction ID: D1290-021r0H
Date of Disbursement

Mailing Address P.O. Box 33199

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

City State Zip Code
St. Petersburg FL 33733

Amount of Each Disbursement this Period

310.22

Purpose of Disbursement
utilities

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Public Opinion Strategies

Transaction ID: D1291-02aE01
Date of Disbursement

Mailing Address 214 N. Fayette Street

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

City State Zip Code
Alexandria VA 22314

Amount of Each Disbursement this Period

8100.00

Purpose of Disbursement
survey

Category/ Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

8431.63

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

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**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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Public Storage

Mailing Address 1400 Alafaya Trail

City Oviedo State FL Zip Code 32765

Purpose of Disbursement storage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D1315-01IE0U
Date of Disbursement: 11 / 01 / 2008

Amount of Each Disbursement this Period: 188.32

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2048 Alaqua Lakes Blvd.

City Lake Mary State FL Zip Code 32779

Purpose of Disbursement auto use

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D1373-02S20A
Date of Disbursement: 11 / 04 / 2008

Amount of Each Disbursement this Period: 142.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2048 Alaqua Lakes Blvd.

City Lake Mary State FL Zip Code 32779

Purpose of Disbursement * In-Kind->auto use

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D1377-02S304
Date of Disbursement: 10 / 20 / 2008

Amount of Each Disbursement this Period: 500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ► 831.18

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

<p>A. Full Name (Last, First, Middle Initial) Roberta Ray</p> <p>Mailing Address 2048 Alaqua Lakes Blvd.</p> <p>City Lake Mary State FL Zip Code 32779</p> <p>Purpose of Disbursement * In-Kind->auto use</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D1378-02S305</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address P. O. Box 105243</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D1503-00gK1R</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 257.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address P. O. Box 105243</p> <p>City Atlanta State GA Zip Code 30348</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D1504-00gK1S</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 117.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

875.89

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Sprint Mailing Address P. O. Box 105243 City Atlanta State GA Zip Code 30348 Purpose of Disbursement telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1505-00gK1T Date of Disbursement 11 / 24 / 2008 Amount of Each Disbursement this Period 264.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) TCV Media.com Mailing Address P.O. Box 603 City Kernersville State NC Zip Code 27285 Purpose of Disbursement website services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1586-020x03 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 1530.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Tele Town-Hall Services Mailing Address 5101 MacArthur Blvd., N.W., #200 City Washington State DC Zip Code 20016 Purpose of Disbursement conference calls Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1607-01oK04 Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 2545.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4340.45

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address P. O. Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement delivery Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1818-00j31n Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 49.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address P. O. Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement delivery Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1819-00j31o Date of Disbursement 10 / 24 / 2008 <hr/> Amount of Each Disbursement this Period 79.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) United Parcel Service <hr/> Mailing Address P. O. Box 7247-0244 <hr/> City Philadelphia State PA Zip Code 19170 <hr/> Purpose of Disbursement delivery Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1820-00j31p Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 77.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

206.87

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: D1935-00Dj1v Date of Disbursement 10 / 27 / 2008
	Mailing Address P. O. Box 30131	Amount of Each Disbursement this Period 1317.04
	City Tampa State FL Zip Code 33630	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement see memo entries Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: D2-016r1J Date of Disbursement 10 / 27 / 2008
	Mailing Address 300 1st Street, S.E.	Amount of Each Disbursement this Period 112.11
	City Washington State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Credit Card Item

C.	Full Name (Last, First, Middle Initial) Froggers Bar and Grill	Transaction ID: D5-00FD0N Date of Disbursement 10 / 27 / 2008
	Mailing Address 27 Alafaya Woods Blvd.	Amount of Each Disbursement this Period 69.55
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement meals Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional)	▶	1317.04
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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Greenstreet Outdoor Lounge & Restaurant	Transaction ID: D7-02bn01 Date of Disbursement 10 / 27 / 2008
	Mailing Address 3468 Main Highway	Amount of Each Disbursement this Period 259.09
	City Coconut Grove State FL Zip Code 33133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hampton Inn	Transaction ID: D8-02bp01 Date of Disbursement 10 / 27 / 2008
	Mailing Address 2301 S.W. 12th Avenue	Amount of Each Disbursement this Period 396.27
	City Fort Lauderdale State FL Zip Code 33315	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Publix	Transaction ID: D12-01QO0T Date of Disbursement 10 / 27 / 2008
	Mailing Address P.O. Box 407	Amount of Each Disbursement this Period 28.34
	City Lakeland State FL Zip Code 33802	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement
see memo entries

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1936-00Dj1w
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

2348.59

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
EPass

Mailing Address P.O. Box 880089

City Boca Raton State FL Zip Code 33488

Purpose of Disbursement
travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6-02WI03
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

40.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
EPass

Mailing Address P.O. Box 880089

City Boca Raton State FL Zip Code 33488

Purpose of Disbursement
travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D7-02WI04
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

40.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

2348.59

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: D8-00FE0E Date of Disbursement 10 / 27 / 2008
	Mailing Address 1850 W. Broadway	Amount of Each Disbursement this Period 4.90
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement ice	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ExxonMobil	Transaction ID: D9-00FE0F Date of Disbursement 10 / 27 / 2008
	Mailing Address 1850 W. Broadway	Amount of Each Disbursement this Period 4.90
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement beverages	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of the NRA	Transaction ID: D10-00li09 Date of Disbursement 10 / 27 / 2008
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 100.00
	City Fairfax State VA Zip Code 22030	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement dinner tickets	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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 120 / 151

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Little Caesars	Transaction ID: D12-02X107
	Mailing Address 2200 Winter Springs Blvd., #107	Date of Disbursement 10 / 27 / 2008
	City Oviedo State FL Zip Code 32765	Amount of Each Disbursement this Period 21.40
	Purpose of Disbursement food & beverage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

B.	Full Name (Last, First, Middle Initial) Nelson Pest Management	Transaction ID: D13-02QI04
	Mailing Address 16877 E. Colonial Drive, #312	Date of Disbursement 10 / 27 / 2008
	City Orlando State FL Zip Code 32820	Amount of Each Disbursement this Period 80.25
	Purpose of Disbursement pest control	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

C.	Full Name (Last, First, Middle Initial) Papa John's	Transaction ID: D14-01My06
	Mailing Address 20 E. Mitchell Hammock Rd. St.	Date of Disbursement 10 / 27 / 2008
	City Oviedo State FL Zip Code 32765	Amount of Each Disbursement this Period 32.53
	Purpose of Disbursement meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Publix

Mailing Address P.O. Box 407

City State Zip Code
Lakeland FL 33802

Purpose of Disbursement
beverage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D15-01QO0R
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

1.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Publix

Mailing Address P.O. Box 407

City State Zip Code
Lakeland FL 33802

Purpose of Disbursement
water

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D16-01QO0S
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

14.37

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City State Zip Code
Des Moines IA 50368

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D18-002n11
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

72.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Staples Mailing Address P. O. Box 9020 City Des Moines State IA Zip Code 50368 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	Transaction ID: D19-002n1J Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 115.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address P. O. Box 9020 City Des Moines State IA Zip Code 50368 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	Transaction ID: D20-002n1K Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 37.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item
C.	Full Name (Last, First, Middle Initial) Staples Mailing Address P. O. Box 9020 City Des Moines State IA Zip Code 50368 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type	Transaction ID: D21-002n1L Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 129.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item

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

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement office supplies
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D22-002n1M
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

45.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement office supplies
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D23-002n1N
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

9.61

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address 83 Geneva Drive

City Oviedo State FL Zip Code 32765

Purpose of Disbursement postage
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D24-000S3i
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

421.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: D25-000S3j Date of Disbursement 10 / 27 / 2008
	Mailing Address 83 Geneva Drive	Amount of Each Disbursement this Period 105.00
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: D26-000S3k Date of Disbursement 10 / 27 / 2008
	Mailing Address 83 Geneva Drive	Amount of Each Disbursement this Period 420.79
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: D27-000S3l Date of Disbursement 10 / 27 / 2008
	Mailing Address 83 Geneva Drive	Amount of Each Disbursement this Period 84.00
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement
delivery

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D28-00j31s
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

158.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement
see memo entries

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D1937-00Dj1x
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

1831.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
7-Eleven

Mailing Address 10959 E. Colonial Drive

City Orlando State FL Zip Code 32817

Purpose of Disbursement
fuel

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D2-02Ew06
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

70.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

SUBTOTAL of Disbursements This Page (optional)

1831.70

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

<p>A. Full Name (Last, First, Middle Initial) Amazon.com, Inc.</p> <p>Mailing Address 1200 12th Avenue, S., #1200</p> <p>City Seattle State WA Zip Code 98144</p> <p>Purpose of Disbursement gifts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D4-01On09</p> <p>Date of Disbursement 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 28.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Credit Card Item</p>
<p>B. Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1640 E. McCulloch Road</p> <p>City Oviedo State FL Zip Code 32765</p> <p>Purpose of Disbursement fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D7-00FM0D</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 21.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Credit Card Item</p>
<p>C. Full Name (Last, First, Middle Initial) Congressional Liquors & Deli</p> <p>Mailing Address 404 1st Street, S.E.</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement food & beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D8-01GQ0v</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 50.14</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Credit Card Item</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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)

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

Any Information copied from such Reports and Statements and 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)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Congressional Liquors & Deli	Transaction ID: D9-01GQ0w
	Mailing Address 404 1st Street, S.E.	Date of Disbursement 11 / 03 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 15.00
	Purpose of Disbursement food & beverage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

B.	Full Name (Last, First, Middle Initial) Congressional Liquors & Deli	Transaction ID: D10-01GQ0x
	Mailing Address 404 1st Street, S.E.	Date of Disbursement 11 / 03 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 24.53
	Purpose of Disbursement food & beverage	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

C.	Full Name (Last, First, Middle Initial) Courtyard by Marriott-Miami Beach	Transaction ID: D11-02cQ01
	Mailing Address 1530 Washington Avenue	Date of Disbursement 11 / 03 / 2008
	City Miami Beach State FL Zip Code 33139	Amount of Each Disbursement this Period 249.32
	Purpose of Disbursement travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Froggers Bar and Grill

Mailing Address 27 Alafaya Woods Blvd.

City State Zip Code
Oviedo FL 32765

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D13-00FD0P
Date of Disbursement

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

Amount of Each Disbursement this Period

224.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Greenstreet Outdoor Lounge & Restaurant

Mailing Address 3468 Main Highway

City State Zip Code
Coconut Grove FL 33133

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D15-02bn02
Date of Disbursement

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

Amount of Each Disbursement this Period

31.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Pizza Boli's

Mailing Address 416 8th Street

City State Zip Code
Washington DC 20003

Purpose of Disbursement
meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D23-01Mw05
Date of Disbursement

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

Amount of Each Disbursement this Period

72.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Pizza Boli's	Transaction ID: D24-01Mw06
	Mailing Address 416 8th Street	Date of Disbursement MM / DD / YYYY 11 / 03 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 70.00
	Purpose of Disbursement meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

B.	Full Name (Last, First, Middle Initial) Pizza Boli's	Transaction ID: D25-01Mw07
	Mailing Address 416 8th Street	Date of Disbursement MM / DD / YYYY 11 / 03 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 41.00
	Purpose of Disbursement meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

C.	Full Name (Last, First, Middle Initial) Pizza Boli's	Transaction ID: D26-01Mw08
	Mailing Address 416 8th Street	Date of Disbursement MM / DD / YYYY 11 / 03 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 36.45
	Purpose of Disbursement meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM] Credit Card Item

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Pizza Boli's <hr/> Mailing Address 416 8th Street <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D27-01Mw09 Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 85.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item
B.	Full Name (Last, First, Middle Initial) Pizza Boli's <hr/> Mailing Address 416 8th Street <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D28-01Mw0A Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 61.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item
C.	Full Name (Last, First, Middle Initial) Visa <hr/> Mailing Address P. O. Box 30131 <hr/> City Tampa State FL Zip Code 33630 <hr/> Purpose of Disbursement see memo entries Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1938-00Dj1y Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 1021.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1021.29
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
1-800-flowers.com

Mailing Address 1600 Stewart Avenue

City Westbury State NY Zip Code 11590

Purpose of Disbursement
flowers

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D1-01O30B
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

68.46

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Little Caesars

Mailing Address 2200 Winter Springs Blvd., #107

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D11-02X108
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

26.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Papa John's

Mailing Address 20 E. Mitchell Hammock Rd. St.

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D14-01My07
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

70.02

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address 4250 Alafaya Trail

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
copies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D23-02Ex03
Date of Disbursement

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

Amount of Each Disbursement this Period

10.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement
see memo entries

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D1939-00Dj1z
Date of Disbursement

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

Amount of Each Disbursement this Period

2115.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Dixie Crossroads

Mailing Address 1475 Garden Street

City Titusville State FL Zip Code 32796

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D3-00fm05
Date of Disbursement

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

Amount of Each Disbursement this Period

523.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Credit Card Item

SUBTOTAL of Disbursements This Page (optional)

2115.65

TOTAL This Period (last page this line number only)

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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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
FedEx Kinko's

Mailing Address 899 North Alafaya Trail

City Orlando State FL Zip Code 32828

Purpose of Disbursement
copies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D4-01Tq0B
Date of Disbursement

11 / 02 / 2008

Amount of Each Disbursement this Period

260.93

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Froggers Bar and Grill

Mailing Address 27 Alafaya Woods Blvd.

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D5-00FD00
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

175.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Marriott Hotels Orlando

Mailing Address 400 W. Livingston Street

City Orlando State FL Zip Code 32801

Purpose of Disbursement
lodging

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D7-016J0C
Date of Disbursement

11 / 13 / 2008

Amount of Each Disbursement this Period

244.20

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Publix

Mailing Address P.O. Box 407

City Lakeland State FL Zip Code 33802

Purpose of Disbursement food & beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D9-01QO0Y
Date of Disbursement: 11 / 03 / 2008

Amount of Each Disbursement this Period: 108.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D11-002n1P
Date of Disbursement: 10 / 21 / 2008

Amount of Each Disbursement this Period: 500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P. O. Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement see memo entries

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D1940-00Dj20
Date of Disbursement: 11 / 24 / 2008

Amount of Each Disbursement this Period: 2421.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ► 2421.66

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
BJ's Wholesale Club

Mailing Address 12190 Lake Underhill Road

City Orlando State FL Zip Code 32825

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D1-01p704
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

479.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
EPass

Mailing Address P.O. Box 880089

City Boca Raton State FL Zip Code 33488

Purpose of Disbursement
travel

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D3-02WI05
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

40.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
FedEx Kinko's

Mailing Address 899 North Alafaya Trail

City Orlando State FL Zip Code 32828

Purpose of Disbursement
copies

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D4-01Tq0A
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

9.54

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Marriott Hotels Orlando

Mailing Address 400 W. Livingston Street

City Orlando State FL Zip Code 32801

Purpose of Disbursement
lodging

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D5-016J0A
Date of Disbursement

11 / 13 / 2008

Amount of Each Disbursement this Period

393.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Marriott Hotels Orlando

Mailing Address 400 W. Livingston Street

City Orlando State FL Zip Code 32801

Purpose of Disbursement
lodging

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D6-016J0B
Date of Disbursement

11 / 13 / 2008

Amount of Each Disbursement this Period

223.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Nelson Pest Management

Mailing Address 16877 E. Colonial Drive, #312

City Orlando State FL Zip Code 32820

Purpose of Disbursement
pest control

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D7-02QI05
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

80.25

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial)
Orlando Reg. Chamber of Commerce

Mailing Address P. O. Box 1234

City Orlando State FL Zip Code 32802

Purpose of Disbursement
dinner tickets

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D9-00ni07
Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

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

Mailing Address P.O. Box 407

City Lakeland State FL Zip Code 33802

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D10-01QO0V
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

95.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

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

Mailing Address P.O. Box 407

City Lakeland State FL Zip Code 33802

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D11-01QO0W
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

28.72

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Publix

Mailing Address P.O. Box 407

City State Zip Code
Lakeland FL 33802

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D12-01QO0X
Date of Disbursement

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

Amount of Each Disbursement this Period

518.57

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address P. O. Box 9020

City State Zip Code
Des Moines IA 50368

Purpose of Disbursement
office supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D14-002n1O
Date of Disbursement

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

Amount of Each Disbursement this Period

95.96

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address 83 Geneva Drive

City State Zip Code
Oviedo FL 32765

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D16-000S3n
Date of Disbursement

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

Amount of Each Disbursement this Period

1.71

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) U.S. Postal Service Mailing Address 83 Geneva Drive City Oviedo State FL Zip Code 32765 Purpose of Disbursement postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D17-000S3o Date of Disbursement 10 / 24 / 2008 Amount of Each Disbursement this Period 126.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item
B.	Full Name (Last, First, Middle Initial) Visa Mailing Address P. O. Box 30131 City Tampa State FL Zip Code 33630 Purpose of Disbursement see memo entries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1941-00Dj21 Date of Disbursement 11 / 24 / 2008 Amount of Each Disbursement this Period 4914.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) American Airlines Mailing Address P. O. Box 619612 City Dallas State TX Zip Code 75261 Purpose of Disbursement transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D3-016j0D Date of Disbursement 11 / 09 / 2008 Amount of Each Disbursement this Period 209.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶	4914.80
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

<p>A. Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Ave., N.E.</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D5-01Om0B</p> <p>Date of Disbursement 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 508.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Credit Card Item</p>
<p>B. Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Ave., N.E.</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D6-01Om0C</p> <p>Date of Disbursement 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 664.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Credit Card Item</p>
<p>C. Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1640 E. McCulloch Road</p> <p>City Oviedo State FL Zip Code 32765</p> <p>Purpose of Disbursement fuel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D10-00FM0C</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 41.39</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM] Credit Card Item</p>

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Chili's Grill

Mailing Address 800 Oviedo Marketplace Blvd.

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D11-020H05
Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

48.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

B.

Full Name (Last, First, Middle Initial)
Delta Air Lines

Mailing Address Hartsfield Inatl. Airport

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
transportation

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D14-00Dm01
Date of Disbursement

11 / 09 / 2008

Amount of Each Disbursement this Period

209.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

C.

Full Name (Last, First, Middle Initial)
Downey's Food Mart

Mailing Address 10385 E. Colonial Drive

City Orlando State FL Zip Code 32817

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D15-02c701
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

213.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Credit Card Item

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Hotel Bedford	Transaction ID: D17-02c901 Date of Disbursement 11 / 09 / 2008
	Mailing Address 118 E. 40th Street	Amount of Each Disbursement this Period 460.50
	City New York State NY Zip Code 10016	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement travel	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) National Space Club-Florida Committee	Transaction ID: D19-01fH08 Date of Disbursement 10 / 22 / 2008
	Mailing Address P.O. Box 21243	Amount of Each Disbursement this Period 75.00
	City Kennedy Space Cent State FL Zip Code 32815	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement dinner tickets	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Papa John's	Transaction ID: D21-01My08 Date of Disbursement 10 / 26 / 2008
	Mailing Address 20 E. Mitchell Hammock Rd. St.	Amount of Each Disbursement this Period 37.79
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage	[MEMO ITEM] Credit Card Item
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Papa John's	Transaction ID: D22-01My09 Date of Disbursement 11 / 02 / 2008
	Mailing Address 20 E. Mitchell Hammock Rd. St.	Amount of Each Disbursement this Period 39.35
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage Candidate Name	[MEMO ITEM] Credit Card Item
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Red Brick Pizza	Transaction ID: D24-02c201 Date of Disbursement 10 / 25 / 2008
	Mailing Address 155 Cranes Roost Blvd., #1210	Amount of Each Disbursement this Period 240.07
	City Altamonte Springs State FL Zip Code 32701	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement food & beverage Candidate Name	[MEMO ITEM] Credit Card Item
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) The UPS Store	Transaction ID: D29-02Ex04 Date of Disbursement 10 / 25 / 2008
	Mailing Address 4250 Alafaya Trail	Amount of Each Disbursement this Period 1498.00
	City Oviedo State FL Zip Code 32765	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage Candidate Name	[MEMO ITEM] Credit Card Item
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A. Full Name (Last, First, Middle Initial) Robert Watkins & Company <hr/> Mailing Address 610 S. Boulevard <hr/> City Tampa State FL Zip Code 33606 <hr/> Purpose of Disbursement accounting services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D1991-002s1S Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	1	1	/	0	3	/	2	0	0	8											
	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>5</td><td>0</td><td>0</td><td>0</td><td>0</td> </tr> </table>	2	5	0	0	0	0	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53													
2	5	0	0	0	0																
Category/ Type																					
B. Full Name (Last, First, Middle Initial) Tonnie Wybensinger <hr/> Mailing Address 1021 N. Garfield Street, #133 <hr/> City Arlington State VA Zip Code 22201 <hr/> Purpose of Disbursement travel/meals Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2013-01QK09 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	1	0	/	2	2	/	2	0	0	8											
	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3</td><td>1</td><td>8</td><td>2</td> </tr> </table>	3	1	8	2	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53															
3	1	8	2																		
Category/ Type																					
C. Full Name (Last, First, Middle Initial) Tonnie Wybensinger <hr/> Mailing Address 1021 N. Garfield Street, #133 <hr/> City Arlington State VA Zip Code 22201 <hr/> Purpose of Disbursement see memo entry Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2014-01QK0A Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y											
	1	0	/	3	1	/	2	0	0	8											
	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td> </tr> </table>	1	1	0	0	0	0	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53													
1	1	0	0	0	0																
Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)	3631.82
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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Kevin Buck

Mailing Address 3523 Victoria Pines Drive

City Orlando State FL Zip Code 32829

Purpose of Disbursement
staff housing
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D1-02be01
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

B.

Full Name (Last, First, Middle Initial)
Tonnie Wybensinger

Mailing Address 1021 N. Garfield Street, #133

City Arlington State VA Zip Code 22201

Purpose of Disbursement
food & beverage
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D2015-01QK0B
Date of Disbursement

11 / 03 / 2008

Amount of Each Disbursement this Period

34.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Tonnie Wybensinger

Mailing Address 1021 N. Garfield Street, #133

City Arlington State VA Zip Code 22201

Purpose of Disbursement
see memo entries
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District:

Transaction ID: D2016-01QK0C
Date of Disbursement

11 / 05 / 2008

Amount of Each Disbursement this Period

887.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

921.66

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Tailgaters

Mailing Address 4000 Central Florida Blvd.

City Orlando State FL Zip Code 32816

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D1-02bb01
Date of Disbursement

10 / 25 / 2008

Amount of Each Disbursement this Period

887.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Memo

B.

Full Name (Last, First, Middle Initial)
Tonnie Wybensinger

Mailing Address 1021 N. Garfield Street, #133

City Arlington State VA Zip Code 22201

Purpose of Disbursement
food & beverage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D2017-01QK0D
Date of Disbursement

11 / 18 / 2008

Amount of Each Disbursement this Period

176.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Tonnie Wybensinger

Mailing Address 1021 N. Garfield Street, #133

City Arlington State VA Zip Code 22201

Purpose of Disbursement
travel

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General Other (specify) ▼

State: District:

Transaction ID: D2018-01QK0E
Date of Disbursement

11 / 24 / 2008

Amount of Each Disbursement this Period

33.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

210.61

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)

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.	Full Name (Last, First, Middle Initial) Zuckerman Spaeder, LLP		Transaction ID: D2029-02Ff08	
	Mailing Address 1800 M Street, #1000		Date of Disbursement 11 / 14 / 2008	
	City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement legal services		Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

595168.92

**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 148 / 151

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Patricia Kelly

Mailing Address 17 Gale Lane

City State Zip Code
Ormond Beach FL 32174

Purpose of Disbursement
contribution refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D918-02Dy01

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

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 149 / 151

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

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NAME OF COMMITTEE (In Full)
Tom Feeney for Congress

A.

Full Name (Last, First, Middle Initial)
Republican Party of Florida

Mailing Address P. O. Box 311

City Tallahassee State FL Zip Code 32302

Purpose of Disbursement
excess funds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1393-002109
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

38000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Republican Party of Florida

Mailing Address P. O. Box 311

City Tallahassee State FL Zip Code 32302

Purpose of Disbursement
excess funds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1394-00210A
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

8000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

46000.00

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

46000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Tom Feeny for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Majority Strategies	Nature of Debt (Purpose): mailing services
Mailing Address 135 Professional Drive, #104	
City State ZIP Code Ponte Vedra Beach FL 32082	

Outstanding Balance Beginning This Period 14246.06	Transaction ID: 22	
Amount Incurred This Period 0.00	Payment This Period 14246.06	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bellwether Consulting Group	Nature of Debt (Purpose): fundraising consulting
Mailing Address P. O. Box 1253	
City State ZIP Code Oakland FL 34760	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 35	
Amount Incurred This Period 3800.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mike Bober	Nature of Debt (Purpose): expense reimbursement
Mailing Address 803 7th Street, N.E., #4	
City State ZIP Code Washington DC 20002	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 41	
Amount Incurred This Period 1379.21	Payment This Period 0.00	Outstanding Balance at Close of This Period 1379.21

1) SUBTOTALS This Period This Page (optional).....	5179.21
2) TOTALS This Period (last page this line number only).....	5179.21
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)	5179.21

Form/Schedule: **FEC3A**

Transaction ID:

This report is amended to correct an error in listing opening period debt to the National Republican Congressional Committee. Information regarding conduits itemized on Schedule A are in compliance with the formatting requirements. Any itemization about a contributor not disclosed on Schedule A is because the contributor is under the itemized threshold and that amount is included on Line 11(a)(ii) of the Detailed Summary Page.