

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

[Empty box]

Ros-Lehtinen For Congress

ADDRESS (number and street)

PO Box 522784

Check if different than previously reported. (ACC)

Miami

FL

33152

2784

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00280537

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

FL

18

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

[Empty boxes]

in the State of

[Empty box]

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

General (30G)

Runoff (30R)

Special (30S)

Election on

[Empty boxes]

in the State of

[Empty box]

5. Covering Period

07

01

2009

through

09

30

2009

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

Antonio L. Argiz

Signature of Treasurer

Electronically Filed by Antonio L. Argiz

Date

10

14

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Ros-Lehtinen For Congress

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	119300.68	492198.96
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	3650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	119300.68	488548.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	45424.80	309261.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3399.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45424.80	305862.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	543091.60	
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).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Ros-Lehtinen For Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

104300.68

229975.96

(ii) Unitemized.....

0.00

125473.00

(iii) TOTAL of contributions

104300.68

355448.96

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

15000.00

136750.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

119300.68

492198.96

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

0.00

3399.36

15. OTHER RECEIPTS
(Dividends, Interest, etc.).....

155.72

3700.16

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

119456.40

499298.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

4 / 112

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45424.80	309261.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	2175.00
(b) Political Party Committees.....	0.00	1475.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3650.00
21. OTHER DISBURSEMENTS.....	0.00	6584.47
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	45424.80	319496.19

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	469060.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	119456.40
25. SUBTOTAL (add Line 23 and Line 24).....	588516.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	45424.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	543091.60

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 112
(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)
Ros-Lehtinen For Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Edward J. Acevedo</p> <p>Mailing Address 2201 2nd Street N</p> <p>City State Zip Code Arlington VA 22201-1566</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Intergovernmental, M-Dade-City Occupation Legislative Aide</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2009</p> <p>Transaction ID: A-C15863</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Dr. Arthur Agatston</p> <p>Mailing Address 2549 Sunset Drive</p> <p>City State Zip Code Miami Beach FL 33140-4240</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer South Beach Cardiology Occupation Doctor</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2009</p> <p>Transaction ID: A-C16030</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Mrs. Sari Agatston</p> <p>Mailing Address 2549 Sunset Drive</p> <p>City State Zip Code Miami Beach FL 33140-4240</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer South Beach Cardiology Occupation Management</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2009</p> <p>Transaction ID: A-C16031</p> <p>Amount of Each Receipt this Period 1000.00</p>
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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: PAGE 6 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Alejandro Aguirre</p> <p>Mailing Address 935 NE 99th Street</p> <p>City State Zip Code Miami Shores FL 33138-2568</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Burger King Corporation Financial Analyst</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9</p> <p>Transaction ID: A-C15819</p> <p>Amount of Each Receipt this Period 20.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. Horacio S. Aguirre</p> <p>Mailing Address 1910 NW 13th Street</p> <p>City State Zip Code Miami FL 33125-2512</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Horacio Stuart Aguirre and Associates President, Commercial Mortgage Broker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 9</p> <p>Transaction ID: A-C15737</p> <p>Amount of Each Receipt this Period 100.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Jonathan Agus</p> <p>Mailing Address 7100 W Camino Real Suite 300</p> <p>City State Zip Code Boca Raton FL 33433-5510</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation A & A Ventures Partner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 9</p> <p>Transaction ID: A-C16017</p> <p>Amount of Each Receipt this Period 1000.00</p>
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SUBTOTAL of Receipts This Page (optional)	1120.00
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 7 / 112
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Joseph Akar		Date of Receipt MM / DD / YYYY 09 / 25 / 2009		
	Mailing Address 1 NE 1st Street Suite 35		Transaction ID: A-C15952		
	City Miami	State FL	Zip Code 33132-2437	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer ACCAR LTD, Inc.		Occupation President		
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00		

B.	Full Name (Last, First, Middle Initial) Mr. Jose B. Aleman		Date of Receipt MM / DD / YYYY 08 / 17 / 2009		
	Mailing Address 5824 Alton Road		Transaction ID: A-C15758		
	City Miami Beach	State FL	Zip Code 33140-2023	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Meridian Partners Consulting		Occupation Managing Partner		
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Annette G. Alvarez		Date of Receipt MM / DD / YYYY 09 / 01 / 2009		
	Mailing Address 9200 SW 92nd Court		Transaction ID: A-C15804		
	City Miami	State FL	Zip Code 33176-2075	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Miami Cncl for Intl. Operatio		Occupation Executive Director		
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 80.00		

SUBTOTAL of Receipts This Page (optional)	580.00
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 8 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. William A. Andersen, J.D. LL.M.
Mailing Address 1038 Adams Drive
City State Zip Code
Key Largo FL 33037-2703
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Andersen Financial Services CPA/GFP
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009
Transaction ID: A-C15866
Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Jonathan L. Awner
Mailing Address 5545 Arbor Lane
City State Zip Code
Coral Gables FL 33156-3434
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Akerman Senterfitt Attorney At Law
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009
Transaction ID: A-C15903
Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Harold Bader
Mailing Address 136 Golden Isles Drive
Apt. 401
City State Zip Code
Hallandale Beach FL 33009-5808
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Dynabilt Building Systems Manufacturer
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009
Transaction ID: A-C15749
Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**
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 9 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gail Baldwin

Mailing Address 1600 S Bayshore Lane
Apt. 8B

City State Zip Code
Coconut Grove FL 33133-4059

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

Name of Employer Occupation
Gail Baldwin Architects President/Architect

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	9

Transaction ID: A-C15743

Amount of Each Receipt this Period
100.00

Election Cycle-to-Date ▼ 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard J. Banko

Mailing Address 25 Snapper Avenue

City State Zip Code
Key Largo FL 33037-4719

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

Name of Employer Occupation
Optimus EMR Software Tester (Quality Control)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C15880

Amount of Each Receipt this Period
50.00

Election Cycle-to-Date ▼ 50.00

C. Full Name (Last, First, Middle Initial)
Ms. Grace G. Barrett

Mailing Address PO Box 413

City State Zip Code
Islamorada FL 33036-0413

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C15867

Amount of Each Receipt this Period
100.00

Election Cycle-to-Date ▼ 100.00

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 10 / 112
(check only one)

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

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert Bauer

Mailing Address 6039 Collins Avenue
Penthouse 15

City Miami Beach State FL Zip Code 33140-2257

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

Name of Employer University of Miami Occupation Student

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15832

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Mrs. Dana A. Beal

Mailing Address 198 Tollgate Boulevard

City Islamorada State FL Zip Code 33036-4218

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

Name of Employer Monroe County Public Schools Occupation Teacher

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15869

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul M. Beal

Mailing Address 198 Tollgate Boulevard

City Islamorada State FL Zip Code 33036-4218

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

Name of Employer Boy Scouts of America Occupation General Manager, Florida

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15868

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Saby Behar

Mailing Address 1911 NE 118th Road

City State Zip Code
North Miami FL 33181-3317

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

Name of Employer Occupation
General Stair Corporation CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: A-C15861

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. William S. Berk

Mailing Address 7360 SW 133rd Terrace

City State Zip Code
Miami FL 33156-6834

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

Name of Employer Occupation
Berk, Merchant & Sims Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	9

Transaction ID: A-C15904

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jose Bermudez

Mailing Address 3604 NW 7th Street

City State Zip Code
Miami FL 33125-4018

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

Name of Employer Occupation
Cuban Crafters Cigars Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: A-C15820

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **1020.00**

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 12 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Richard N. Bernstein

Mailing Address 10220 SW 142nd Street

City State Zip Code
Miami FL 33176-7069

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

Name of Employer Occupation
Greenberg Traurig Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 17 / 2009

Transaction ID: A-C15941

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Brett C. Bibeau

Mailing Address 1263 SW 18th Street

City State Zip Code
Miami FL 33145-1631

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

Name of Employer Occupation
Miami River Commission Managing Director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 17 / 2009

Transaction ID: A-C15750

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ms. Howard Bienenfeld

Mailing Address 5921 SW 33rd Lane

City State Zip Code
Fort Lauderdale FL 33312-6364

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

Name of Employer Occupation
BLS Financial Financial Svcs

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 04 / 2009

Transaction ID: A-C16018

Amount of Each Receipt this Period
100.00

Contribution

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: (check only one)	PAGE 13 / 112
	<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

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Eric Blair-Joannou	Date of Receipt MM / DD / YYYY 08 / 15 / 2009
	Mailing Address 6401 SW 134th Drive	Transaction ID: A-C15767
	City State Zip Code Miami FL 33156-7046	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Cornell University	Occupation Student	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Gladys G. Blanco	Date of Receipt MM / DD / YYYY 09 / 01 / 2009
	Mailing Address 932 SW 136th Place	Transaction ID: A-C15809
	City State Zip Code Miami FL 33184-1871	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
Name of Employer University of Miami Library	Occupation Staff Associate	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 20.00	

C.	Full Name (Last, First, Middle Initial) Mr. Allen S. Blaustein	Date of Receipt MM / DD / YYYY 09 / 04 / 2009
	Mailing Address 701 Brickell Key Boulevard Apt. 2006	Transaction ID: A-C15850
	City State Zip Code Miami FL 33131-2680	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Weil, Gotshalm & Manges, LLP	Occupation Attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1270.00
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 14 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Frances M. Bohnsack

Mailing Address 5700 SW 67th Avenue

City State Zip Code
South Miami FL 33143-1922

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

Name of Employer Occupation
Miami River Marine Group Executive Director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 17 / 2009

Transaction ID: A-C15741

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. James J. Boilini

Mailing Address 544 Sound Drive

City State Zip Code
Key Largo FL 33037-4820

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

Name of Employer Occupation
Monroe County Public Schools Optometrist / Educator

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 13 / 2009

Transaction ID: A-C15890

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mrs. Irma Braman

Mailing Address 2060 Biscayne Boulevard

City State Zip Code
Miami FL 33137-5024

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 29 / 2009

Transaction ID: A-C15842

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 15 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

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

Mailing Address 2060 Biscayne Boulevard

City State Zip Code
Miami FL 33137-5024

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15846

Amount of Each Receipt this Period
2400.00

2500.00

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

Mailing Address 2060 Biscayne Boulevard

City State Zip Code
Miami FL 33137-5024

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

Name of Employer Occupation
Braman Enterprises Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15796

Amount of Each Receipt this Period
100.00

2500.00

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

Mailing Address 2060 Biscayne Boulevard

City State Zip Code
Miami FL 33137-5024

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

Name of Employer Occupation
Braman Enterprises Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15843

Amount of Each Receipt this Period
2400.00

2500.00

SUBTOTAL of Receipts This Page (optional) ► **4900.00**

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 16 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Esperanza Bravo De Varona

Mailing Address 2824 SW 92nd Court

City State Zip Code
Miami FL 33165-3130

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

Name of Employer Occupation
University of Miami Professional Co-Chair

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15790

Amount of Each Receipt this Period
20.00

45.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph R. Buchanan

Mailing Address 6390 SW 96th Street

City State Zip Code
Miami FL 33156-1847

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

Name of Employer Occupation
Wampler, Buchanan, Walker Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 02 / 2009

Transaction ID: A-C15774

Amount of Each Receipt this Period
200.00

200.00

C. Full Name (Last, First, Middle Initial)
Mr. Eric Buermann

Mailing Address 6075 SW 92nd Street

City State Zip Code
Miami FL 33156-1960

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

Name of Employer Occupation
Squire Sanders & Dempsey LLC Attorney At Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-C15757

Amount of Each Receipt this Period
400.00

650.00

SUBTOTAL of Receipts This Page (optional) ► **620.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Richard A. Bunnell

Mailing Address 1620 S Bayshore Court
Apt. 6

City Miami State FL Zip Code 33133-4031

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

Name of Employer Bunnell Foundation, Inc. Occupation Marine Contractor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 17 / 2009
Transaction ID: A-C15746
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mrs. Teresa Cabal

Mailing Address 12820 SW 8th Street

City Miami State FL Zip Code 33184-1309

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

Name of Employer La Deliciosa Bakery Occupation Employee

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 17 / 2009
Transaction ID: A-I15780
 Amount of Each Receipt this Period: 35.00
 Inkind: Pastelitos

C. Full Name (Last, First, Middle Initial)
Mr. Felix Castillo

Mailing Address 625 University Drive

City Coral Gables State FL Zip Code 33134-7059

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

Name of Employer Castillo & Company, CPA, PA Occupation CPA

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 17 / 2009
Transaction ID: A-C15745
 Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► **435.00**

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 18 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Carlos E. Centurion

Mailing Address 2951 S Bayshore Drive
Apt. 605

City Miami State FL Zip Code 33133-6002

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

Name of Employer Por Fin Restaurant Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 01 / 2009
Transaction ID: A-C15800
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Harvey Chaplin

Mailing Address 1600 NW 163rd Street

City Miami State FL Zip Code 33169-5641

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

Name of Employer Southern Wine & Spirits of America Occupation Chairman and CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 17 / 2009
Transaction ID: A-I15781
 Amount of Each Receipt this Period: 200.00
 Inkind: Wine

C. Full Name (Last, First, Middle Initial)
Dr. Charles J. Chase

Mailing Address 2065 Venetian Way

City Winter Park State FL Zip Code 32789-1216

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

Name of Employer AGO Occupation Anesthesiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 14 / 2009
Transaction ID: A-C15920
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Arthur B. Choate

Mailing Address 1390 S Dixie Highway
Suite 2221

City State Zip Code
Coral Gables FL 33146-2946

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

Name of Employer Occupation
ArtMarina President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: A-C15860

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Miguel Angel Cobas

Mailing Address 5444 NW 94th Doral Place

City State Zip Code
Doral FL 33178-2029

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

Name of Employer Occupation
Jackson Memorial Hospital Anesthesiologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15922

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Lorenzo Cobiella, Esq.

Mailing Address 6530 Lake Patricia Drive

City State Zip Code
Miami Lakes FL 33014-3083

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

Name of Employer Occupation
Osvaldo N. Soto Law Offices Attorney At Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 02 / 2009

Transaction ID: A-C15775

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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 20 / 112

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Joanne D. Connolly

Mailing Address 17505 SW 84th Avenue

City State Zip Code
Palmetto Bay FL 33157-6080

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 20.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15821

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Mr. R. Clarke Cooper

Mailing Address 1439 Chapin Street NW

City State Zip Code
Washington DC 20009-4582

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

Name of Employer Occupation
Miccosukee Tribe of Indians Dir, Intergovernmental Affairs

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2009

Transaction ID: A-C15773

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Javier Correoso

Mailing Address 8831 SW 58th Street

City State Zip Code
Miami FL 33173-1692

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

Name of Employer Occupation
Rep. Party of Dade County Executive Director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 11 / 2009

Transaction ID: A-C15835

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

520.00

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 21 / 112
	<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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Hari Cruz-Bustillo	Date of Receipt MM / DD / YYYY 08 / 17 / 2009
	Mailing Address 7832 SW 84th Place	Transaction ID: A-C15744
	City State Zip Code Miami FL 33143-3738	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Triangle Association, Inc. Occupation Consultant Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 200.00	

B.	Full Name (Last, First, Middle Initial) Ms. Miriam J. Cruz-Bustillo	Date of Receipt MM / DD / YYYY 08 / 17 / 2009
	Mailing Address 8241 SW 89th Street	Transaction ID: A-C15748
	City State Zip Code Miami FL 33156-7331	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer IVC Television, Inc. Occupation Attorney Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 200.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Wendy C. Dean	Date of Receipt MM / DD / YYYY 09 / 02 / 2009
	Mailing Address 8850 SW 155th Terrace	Transaction ID: A-C15840
	City State Zip Code Palmetto Bay FL 33157-2041	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Towncare Dental Occupation Marketing Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 50.00	

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Erick Deeb

Mailing Address 10470 SW 96th Terrace

City State Zip Code
Miami FL 33176-2710

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

Name of Employer Occupation
Law Offices of Erick L. Deeb Attorney at Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15815

Amount of Each Receipt this Period
100.00

100.00

B. Full Name (Last, First, Middle Initial)
Mr. Nicolay W. Del Salto

Mailing Address 320 NE 54th Street
Apt. 2

City State Zip Code
Miami FL 33137-2933

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

Name of Employer Occupation
Dominick & Dominick, LLC Stockbroker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15807

Amount of Each Receipt this Period
40.00

40.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank J. Derfler

Mailing Address 88005 Overseas Highway
Suite 10 PMB 120

City State Zip Code
Islamorada FL 33036-6000

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C16085

Amount of Each Receipt this Period
50.00

50.00

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Marlene F. Derfler

Mailing Address 88005 Overseas Highway
Suite 10 PMB 120

City Islamorada State FL Zip Code 33036-6000

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 3 / 2 0 0 9

Transaction ID: A-C15881

Amount of Each Receipt this Period
 50.00

50.00

B. Full Name (Last, First, Middle Initial)
Ms. Yaffa Dermer

Mailing Address 2525 Flamingo Place

City Miami Beach State FL Zip Code 33140-4318

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 0 4 / 2 0 0 9

Transaction ID: A-C15852

Amount of Each Receipt this Period
 500.00

500.00

C. Full Name (Last, First, Middle Initial)
Mr. Jose Felix Diaz

Mailing Address 888 S Douglas Road
Apt. 602

City Coral Gables State FL Zip Code 33134-7566

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

Name of Employer Akerman Senterfitt Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: A-C15801

Amount of Each Receipt this Period
 100.00

100.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Daniel Diaz Leyva

Mailing Address 90 Edgewater Drive
Apt. 1206

City State Zip Code
Coral Gables FL 33133-6920

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

Name of Employer Occupation
Southern Strategy Group Attorney At Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: A-C16011

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. Christian Diez

Mailing Address 3000 Bird Avenue
Apt. 1

City State Zip Code
Miami FL 33133-4530

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

Name of Employer Occupation
Jackson Memorial Hospital Anesthesiologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 14 / 2009

Transaction ID: A-C15924

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Fernando U. Diez

Mailing Address 16155 SW 117th Avenue
Suite B21

City State Zip Code
Miami FL 33177-1617

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

Name of Employer Occupation
Marin and Sons, Inc. Government Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 04 / 2009

Transaction ID: A-C15849

Amount of Each Receipt this Period
250.00

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Esther Donn

Mailing Address 251 174th Street
Apt. 1501

City Sunny Isles Beach State FL Zip Code 33160-3358

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt: 08 / 17 / 2009
Transaction ID: A-C15752
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Alan L. Drecksler

Mailing Address 13851 SW 67th Court

City Palmetto Bay State FL Zip Code 33158-1382

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

Name of Employer Rose Realty and Company, Inc. Occupation Florida Real Estate Broker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 28 / 2009
Transaction ID: A-C16033
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul J. Driscoll

Mailing Address 2906 Grove Drive

City Fort Pierce State FL Zip Code 34981-6044

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

Name of Employer Driscoll Citrus Service, Inc. Occupation Retired Grove Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt: 07 / 16 / 2009
Transaction ID: A-C15724
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Samuel J. Dubbin, Esq.
Mailing Address 14000 SW 104th Avenue

City State Zip Code
Miami FL 33176-7063

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

Name of Employer Occupation
Dubbin & Kravetz Attorney At Law

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15905

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼
750.00

B. Full Name (Last, First, Middle Initial)
Mr. Irwin Edelstein
Mailing Address 10242 Lone Star Place

City State Zip Code
Davie FL 33328-1341

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

Name of Employer Occupation
Irwin Edelstein & Associates Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15921

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Craig S. Eldredge
Mailing Address P.O. Box 2161

City State Zip Code
Key Largo FL 33037

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

Name of Employer Occupation
Self-Employed Investor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15870

Amount of Each Receipt this Period
100.00

Election Cycle-to-Date ▼
100.00

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 27 / 112
(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)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Paul S. Ellison, M.D.
Mailing Address 92165 Overseas Highway
City State Zip Code
Tavernier FL 33070
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation
Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 100.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009
Transaction ID: A-C15871
Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Catherine Ettman
Mailing Address 1761 Cleveland Road
City State Zip Code
Miami Beach FL 33141-1720
FEC ID number of contributing federal political committee. **C**
Name of Employer Princeton University Occupation
Student
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 20.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009
Transaction ID: A-C15833
Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jana Falic
Mailing Address 150 Harbour Way
City State Zip Code
Bal Harbour FL 33154-1333
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation
Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009
Transaction ID: A-C15893
Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► 2520.00
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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Simon Falic

Mailing Address 150 Harbour Way

City State Zip Code
Bal Harbour FL 33154-1333

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

Name of Employer Occupation
Duty Free Americas Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15894

Amount of Each Receipt this Period
2400.00

2400.00

B. Full Name (Last, First, Middle Initial)
Mr. George Feldenkreis

Mailing Address 5760 N Bay Road

City State Zip Code
Miami Beach FL 33140-2035

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

Name of Employer Occupation
Perry Ellis International Chairman and CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2009

Transaction ID: A-C15851

Amount of Each Receipt this Period
1000.00

1500.00

C. Full Name (Last, First, Middle Initial)
Mr. Rudy J. Fernandez

Mailing Address Office of Governmental Affairs
1320 South Dixie Highway, Suite 32

City State Zip Code
Coral Gables FL 33146-2949

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

Name of Employer Occupation
University of Miami Vice President of Government Affairs

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15799

Amount of Each Receipt this Period
250.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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 / 112
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Maria A. Fernandez-Pistorino		Date of Receipt MM / DD / YYYY 09 / 01 / 2009		
	Mailing Address 6535 SW 123rd Street		Transaction ID: A-C15805		
	City Miami	State FL	Zip Code 33156-5554	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pistorino & Alan Engineers		Occupation Secretary		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 60.00			

B.	Full Name (Last, First, Middle Initial) Mr. John C. Fleming		Date of Receipt MM / DD / YYYY 09 / 13 / 2009		
	Mailing Address 218 Preston Street		Transaction ID: A-C15883		
	City Islamorada	State FL	Zip Code 33036-3740	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Outcome Labs LLC		Occupation Founder and CEO		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 50.00			

C.	Full Name (Last, First, Middle Initial) Luis Font, Esq.		Date of Receipt MM / DD / YYYY 09 / 01 / 2009		
	Mailing Address 1160 NE 100th Street		Transaction ID: A-C15798		
	City Miami Shores	State FL	Zip Code 33138-2602	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Font & Diamantis, PA		Occupation Attorney		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	▶	610.00
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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Jonathan Fox

Mailing Address 235 Solano Prado

City State Zip Code
Coral Gables FL 33156-2351

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

Name of Employer Westchester General Hospital Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: A-C16013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. Susan Fox

Mailing Address 2500 SW 75th Avenue

City State Zip Code
Miami FL 33155-2805

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

Name of Employer Westchester General Hospital Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: A-C16014

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Marilyn Freisner

Mailing Address 14361 Commerce Way Suite 205

City State Zip Code
Miami Lakes FL 33016-1558

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt

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

Transaction ID: A-C16025

Amount of Each Receipt this Period
200.00

Contribution

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 31 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Monte Friedkin
 Mailing Address PO Box 126100
 City Hialeah State FL Zip Code 33012-1601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Monte Friedkin Properties Occupation Owner
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt 09 / 14 / 2009
Transaction ID: A-C15906
 Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Dr. Phillip Frost, M.D.
 Mailing Address 8800 NW 36th Street
 City Doral State FL Zip Code 33178-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IVAX Corporation Occupation Chairman
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
 Date of Receipt 09 / 12 / 2009
Transaction ID: A-C16026
 Amount of Each Receipt this Period 2400.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Dr. Phillip Frost, M.D.
 Mailing Address 8800 NW 36th Street
 City Doral State FL Zip Code 33178-2404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IVAX Corporation Occupation Chairman
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
 Date of Receipt 09 / 12 / 2009
Transaction ID: A-C16027
 Amount of Each Receipt this Period 2400.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 5300.00
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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Maria D. Garcia

Mailing Address 65 Campina Court

City State Zip Code
Coral Gables FL 33134-1811

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

Name of Employer Occupation
Houck, Anderson, P.A. Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2009

Transaction ID: A-C15777

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Maria Gari

Mailing Address PO Box 145014

City State Zip Code
Coral Gables FL 33114-5014

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

Name of Employer Occupation
Miami-Dade Public Schools Social Worker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 02 / 2009

Transaction ID: A-C15768

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Roy Garrett

Mailing Address 436 Laguna Avenue

City State Zip Code
Key Largo FL 33037-4340

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2009

Transaction ID: A-C15947

Amount of Each Receipt this Period
500.00

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 33 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Ralf Gebhard, M.D.

Mailing Address 1111 Brickell Bay Drive
Apt. 2708

City Miami State FL Zip Code 33131-2963

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

Name of Employer Jackson Memorial Hospital Occupation Anesthesiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt: 09 / 14 / 2009
Transaction ID: A-C15929
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Ms. Romy Gerber

Mailing Address 201 Aqua Avenue
Apt. 801

City Miami Beach State FL Zip Code 33141-5879

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

Name of Employer Self-Employed Occupation Jewelry Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 20.00

Date of Receipt: 09 / 01 / 2009
Transaction ID: A-C15812
 Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Mr. Luis Glaser

Mailing Address 8887 SW 78th Court

City Miami State FL Zip Code 33156-7561

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

Name of Employer University of Miami Occupation Professor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt: 09 / 04 / 2009
Transaction ID: A-C15854
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **220.00**

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 34 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Barbara Goebel

Mailing Address 376 S Coconut Palm Boulevard

City State Zip Code
Tavernier FL 33070-2251

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

Name of Employer Occupation
Holiday RV's, Inc. Sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15889

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Marc S. Goldman

Mailing Address 2494 S Ocean Boulevard

City State Zip Code
Boca Raton FL 33432-8201

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

Name of Employer Occupation
Crown Associates Realty, Inc. Industrial Real Estate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2009

Transaction ID: A-C15945

Amount of Each Receipt this Period
2400.00

C.

Full Name (Last, First, Middle Initial)
Ms. Cathie Ellen Gould McCallum

Mailing Address 10 Edgewater Drive
Apt. 14F

City State Zip Code
Coral Gables FL 33133-6968

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

Name of Employer Occupation
eMedical Education, Ltd. Internet Medical Education

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2009

Transaction ID: A-C15856

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **2920.00**

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 / 112
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Ms. Candi S. Graves		Date of Receipt
	Mailing Address 89169 Old Highway		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tavernier	FL	33070-2040
	FEC ID number of contributing federal political committee. C		Transaction ID: A-C15884
Name of Employer Realty World Freewheeler		Occupation Sales Agent	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="50.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Alexander Gross		Date of Receipt
	Mailing Address 10155 Collins Avenue Apt. 804		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bal Harbour	FL	33154-1622
	FEC ID number of contributing federal political committee. C		Transaction ID: A-C16028
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="125.00"/>
			Contribution

C.	Full Name (Last, First, Middle Initial) Mr. Alexander Halberstein		Date of Receipt
	Mailing Address 1170 E Hallandale Beach Boulevard Suite B		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hallandale Beach	FL	33009-4437
	FEC ID number of contributing federal political committee. C		Transaction ID: A-C15907
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="675.00"/>
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 36 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Susan J. Hale

Mailing Address 224 Tavernier Drive

City State Zip Code
Tavernier FL 33070-2538

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15885

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Norman J. Halliday

Mailing Address 660 NE 105th Street

City State Zip Code
Miami Shores FL 33138-2054

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

Name of Employer Occupation
UM-Jackson Mem. Hospital Professor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15931

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Rocio C. Harb

Mailing Address 19810 NE 17th Avenue

City State Zip Code
North Miami Beach FL 33179-3144

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

Name of Employer Occupation
Dominick and Dominick Senior Vice President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 02 / 2009

Transaction ID: A-C15841

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Eric A. Harris, M.D.
Mailing Address 2574 Mayfair Lane

City State Zip Code
Weston FL 33327-1506

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

Name of Employer Occupation
UM-Jackson Mem. Hospital Assistant Professor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2009

Transaction ID: A-C16035

Amount of Each Receipt this Period
100.00

100.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank N. Hawkins, Jr.
Mailing Address 204 Ocean Drive

City State Zip Code
Tavernier FL 33070-2342

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

Name of Employer Occupation
Hawk Associates, Inc. President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C16068

Amount of Each Receipt this Period
1000.00

Contribution
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Hady Hernandez
Mailing Address 2424 NW 46th Street

City State Zip Code
Miami FL 33142-4652

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

Name of Employer Occupation
L&J General Int'l Corp. A/R Supervisor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2009

Transaction ID: A-C15769

Amount of Each Receipt this Period
200.00

200.00

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 38 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Mitch Herrick

Mailing Address 16220 La Costa Drive

City State Zip Code
Weston FL 33326-1422

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

Name of Employer Occupation
Federal Aviation Administrator Air Traffic Controller

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15822

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Mr. Joel D. Hoppenstein

Mailing Address 1865 Cleveland Road

City State Zip Code
Miami Beach FL 33141-1722

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

Name of Employer Occupation
Newlands Group LLC President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15891

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Joel D. Hoppenstein

Mailing Address 1865 Cleveland Road

City State Zip Code
Miami Beach FL 33141-1722

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

Name of Employer Occupation
Newlands Group LLC President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15892

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **2520.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Saif Ishaof

Mailing Address 9238 SW 132nd Street

City Miami State FL Zip Code 33176-5742

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

Name of Employer City Year, Inc. Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 01 / 2009
Transaction ID: A-C15803
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Virginia A. Jacko

Mailing Address 2 Grove Isle Drive
Unit B-203

City Miami State FL Zip Code 33133-4119

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

Name of Employer Miami Lighthouse for the Blind Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 17 / 2009
Transaction ID: A-C15740
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Hyman Jacobs

Mailing Address 181 Harborview S

City Lawrence State NY Zip Code 11559-1909

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

Name of Employer Windsor Health Care Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 11 / 2009
Transaction ID: A-C16009
 Amount of Each Receipt this Period: 2200.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Steven Jacoby

Mailing Address 4401 N Hills Drive

City State Zip Code
Hollywood FL 33021-1701

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

Name of Employer SMD Capital Corp. Occupation Associate

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	9

Transaction ID: A-C15939

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sallye G. Jude

Mailing Address 200 Edgewater Drive

City State Zip Code
Coral Gables FL 33133-6622

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

Name of Employer The Miami River Inn Occupation Hotelier

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	9

Transaction ID: A-C15762

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. David J. Kaiserman

Mailing Address 700 NW 107th Avenue
Floor 3

City State Zip Code
Miami FL 33172-3161

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

Name of Employer Lennar Ventures Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	9

Transaction ID: A-C15908

Amount of Each Receipt this Period
500.00

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 41 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Herbert Karliner

Mailing Address 20185 E Country Club Drive
PH4

City State Zip Code
Miami FL 33180-3048

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

Name of Employer Occupation
Miami-Dade Holocaust Survivors, Inc. Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15927

Amount of Each Receipt this Period
125.00

275.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Eleanor M. Katz

Mailing Address 21218 St Andrews Boulevard
404

City State Zip Code
Boca Raton FL 33433-2449

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: A-C16012

Amount of Each Receipt this Period
1000.00

1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph Kavana

Mailing Address Tower Suite D-E, 19500 Turnberry W

City State Zip Code
North Miami Beach FL 33180

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

Name of Employer Occupation
K-Group Holdings, Inc CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15909

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **1625.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Arthur Keiser

Mailing Address 6069 NW 87th Avenue

City State Zip Code
Parkland FL 33067-5002

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

Name of Employer Occupation
Keiser University Chancellor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 24 / 2009

Transaction ID: A-C16024

Amount of Each Receipt this Period
1200.00

Contribution

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

Mailing Address 6069 NW 87th Avenue

City State Zip Code
Parkland FL 33067-5002

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

Name of Employer Occupation
Keiser University Vice Chancellor, Community Relations

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 24 / 2009

Transaction ID: A-C16022

Amount of Each Receipt this Period
1900.00

Contribution

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

Mailing Address 6069 NW 87th Avenue

City State Zip Code
Parkland FL 33067-5002

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

Name of Employer Occupation
Keiser University Vice Chancellor, Community Relations

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 24 / 2009

Transaction ID: A-C16023

Amount of Each Receipt this Period
400.00

Contribution

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 43 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Thomas S. Kim

Mailing Address 5525 Ajuga Court

City State Zip Code
Centreville VA 20120-3089

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

Name of Employer Occupation
Scribe Strategies & Advisors Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 29 / 2009

Transaction ID: A-C15787

Amount of Each Receipt this Period
2000.00

2000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Nechama Adina Korf

Mailing Address 1521 Alton Road
Apt. 133

City State Zip Code
Miami Beach FL 33139-3301

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

Name of Employer Occupation
Housewife Housewife

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 14 / 2009

Transaction ID: A-C15936

Amount of Each Receipt this Period
500.00

500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Glenda Krongold

Mailing Address 1441 Brickell Avenue
Suite 1430

City State Zip Code
Miami FL 33131-3426

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

Name of Employer Occupation
M. Goldkrown, Inc. Officer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 14 / 2009

Transaction ID: A-C15910

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Loren Krongold

Mailing Address 848 Brickell Key Drive
Apt. 3805

City Miami State FL Zip Code 33131-3707

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: A-C15911

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. M. Ronald Krongold

Mailing Address 130 S Hibiscus Drive

City Miami Beach State FL Zip Code 33139-5130

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

Name of Employer Krongold & Singer, P.L. Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: A-C15913

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. John Kruger

Mailing Address 5 Evergreen Court

City Towaco State NJ Zip Code 07082-1459

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

Name of Employer TNS Nursing Homes Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

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

Transaction ID: A-C16008

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Denise Lambert-Mantilla

Mailing Address 10840 Westwood Lake Drive

City State Zip Code
Miami FL 33165-6936

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

Name of Employer Self-Employed Occupation
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2009

Transaction ID: A-C15776

Amount of Each Receipt this Period
270.00

B. Full Name (Last, First, Middle Initial)
Ms. Aida Lazzarin

Mailing Address 427 Biltmore Way Suite 102

City State Zip Code
Coral Gables FL 33134-5735

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

Name of Employer Homemaker Occupation
Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15808

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Dr. Allison J. Lee, M.D.

Mailing Address 4015 N Meridian Avenue Apt. 6

City State Zip Code
Miami Beach FL 33140-3310

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

Name of Employer Jackson Memorial Hospital Occupation
Anesthesiologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15935

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. William Lehman, Jr.

Mailing Address 21400 NW 2nd Avenue

City State Zip Code
Miami FL 33169-2126

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

Name of Employer Occupation
Lehman Dealership Enterprises President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2009

Transaction ID: A-C16034

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Gonzalo Leon De La Barra

Mailing Address 7350 SW 112th Street

City State Zip Code
Miami FL 33156-4541

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

Name of Employer Occupation
Fabric Innovations Operations Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-C15747

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bern Levine

Mailing Address 266 S Coconut Lane

City State Zip Code
Miami Beach FL 33139-5164

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

Name of Employer Occupation
Jungle Island President and Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15914

Amount of Each Receipt this Period
500.00

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 47 / 112

(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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Mary H. Levine

Mailing Address 266 S Coconut Lane

City State Zip Code
Miami Beach FL 33139-5164

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

Name of Employer Occupation
Jungle Island Executive

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15915

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Lucille Lewis

Mailing Address 1621 26th Street S
Apt. 8

City State Zip Code
Arlington VA 22206-2959

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

Name of Employer Occupation
US House of Representatives Staff

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2009

Transaction ID: A-C15940

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Dr. Michael C. Lewis, M.D.

Mailing Address 9420 Sea Turtle Manor

City State Zip Code
Plantation FL 33324-2915

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

Name of Employer Occupation
UM Dept. of Anesthesiology Professor

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 50.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15934

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Lisette Llamas

Mailing Address 712 Jeronimo Drive

City State Zip Code
Coral Gables FL 33146-1269

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

Name of Employer Occupation
Dental Practice Office Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 17 / 2009

Transaction ID: A-C15742

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Jose E. Lopez-Jenkins

Mailing Address 1425 Consolata Avenue

City State Zip Code
Coral Gables FL 33146-2408

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

Name of Employer Occupation

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 01 / 2009

Transaction ID: A-C15810

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Mr. Nick Lopez-Jenkins

Mailing Address 322 Candia Avenue

City State Zip Code
Coral Gables FL 33134-7312

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

Name of Employer Occupation
Kobrand Sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 01 / 2009

Transaction ID: A-C15823

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **140.00**

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 49 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Yara Lorenzo

Mailing Address 9875 SW 138th Street

City State Zip Code
Miami FL 33176-6725

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

Name of Employer Occupation
U.S. Federal Court Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2009

Transaction ID: A-C15772

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. David A. Lubarsky, M.D., MBA

Mailing Address 1611 N.W. 12th Avenue, Central 300

City State Zip Code
Miami FL 33136

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

Name of Employer Occupation
Dept. of Anesthesiology Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2009

Transaction ID: A-C15942

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James Marinitti

Mailing Address 3731 SW 160th Avenue
Apt. 308

City State Zip Code
Miramar FL 33027-4678

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

Name of Employer Occupation
FAA Air Traffic Controller

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15824

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **770.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Susan Marshall

Mailing Address 4674 Kell Lane

City State Zip Code
Alexandria VA 22311-4918

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

Name of Employer Occupation
Overseas Private Investment Co Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 17 / 2009

Transaction ID: A-C15738

Amount of Each Receipt this Period
100.00

100.00

B. Full Name (Last, First, Middle Initial)
Mr. Pedro Martin

Mailing Address 900 Biscayne Boulevard

City State Zip Code
Miami FL 33132-1561

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

Name of Employer Occupation
900 Biscayne Bay LLC Principal

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 17 / 2009

Transaction ID: A-I15782

Amount of Each Receipt this Period
500.00

Inkind: Valet Service

500.00

C. Full Name (Last, First, Middle Initial)
Mr. Orlando Martinez-Miller

Mailing Address 1980 Oak Street

City State Zip Code
South Pasadena CA 91030-4955

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

Name of Employer Occupation
Retired Retired School Administrator

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 17 / 2009

Transaction ID: A-C15946

Amount of Each Receipt this Period
10.00

30.00

SUBTOTAL of Receipts This Page (optional) ► **610.00**

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 / 112 (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)
Ros-Lehtinen For Congress

<p>A. Full Name (Last, First, Middle Initial) Ms. Helen Matas</p> <p>Mailing Address 19941 NW 8th Street</p> <p>City State Zip Code Pembroke Pines FL 33029-3331</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Florida House of Rep. Aide</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 20.00</p>	<p>Date of Receipt 09 / 01 / 2009</p> <p>Transaction ID: A-C15825</p> <p>Amount of Each Receipt this Period 20.00</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Dr. Susana May, M.D., MPH</p> <p>Mailing Address 141 Lake Road</p> <p>City State Zip Code Tavernier FL 33070-2220</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self-Employed Physician</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt 09 / 13 / 2009</p> <p>Transaction ID: A-C15872</p> <p>Amount of Each Receipt this Period 100.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Mr. Carlyn Mayer</p> <p>Mailing Address 2494 S Ocean Boulevard # M-1</p> <p>City State Zip Code Boca Raton FL 33432-8201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 09 / 17 / 2009</p> <p>Transaction ID: A-C15937</p> <p>Amount of Each Receipt this Period 1000.00</p>
--	--

SUBTOTAL of Receipts This Page (optional)	1120.00
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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Lothar Mayer

Mailing Address 2494 S Ocean Boulevard
Apt. M1

City Boca Raton State FL Zip Code 33432-8201

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 17 / 2009
Transaction ID: A-C15938
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas R. McDonald

Mailing Address PO Box 1040

City Tavernier State FL Zip Code 33070-1040

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

Name of Employer Tom McDonald, Certified Public Account Occupation Certified Public Accountant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 13 / 2009
Transaction ID: A-C15886
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Ms. Jannette Melo

Mailing Address 611 SW 114th Court

City Miami State FL Zip Code 33174-4001

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

Name of Employer PrepSmart, LLC Occupation Tutor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 01 / 2009
Transaction ID: A-C15826
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► **1070.00**

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 / 112

(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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. David Mermelstein

Mailing Address 9121 SW 66th Terrace

City State Zip Code
Miami FL 33173-2468

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C16020

Amount of Each Receipt this Period

125.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Mr. Rodolfo E. Milani

Mailing Address 7741 Ponce De Leon Road

City State Zip Code
Miami FL 33143-6145

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

Name of Employer Occupation
Dominick & Dominick, LLC Stockbroker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15802

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Miles

Mailing Address 13167 NW 7th Street

City State Zip Code
Miami FL 33182-2361

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

Name of Employer Occupation
FL House of Representatives Legislative Assistant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 150.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 29 / 2009

Transaction ID: A-I15847

Amount of Each Receipt this Period

150.00

Inkind: Cigars

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 54 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Howard Millhauser

Mailing Address 12251 Tropical Way (SW 60 Court)

City State Zip Code
Pinecrest FL 33156

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

Name of Employer Occupation
Broward Paper & Packaging President/CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2009

Transaction ID: A-C15853

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Captain Jordan Monocandilos

Mailing Address 701 N Mashta Drive

City State Zip Code
Key Biscayne FL 33149-1722

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

Name of Employer Occupation
Bernuth Agencies, Inc. Consultant/Businessman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2009

Transaction ID: A-C15763

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ms. Helen H. Morrell

Mailing Address 1090 N Venetian Drive

City State Zip Code
Miami Beach FL 33139-1017

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-C15735

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Cherna Moskowitz

Mailing Address 4744 N Bay Road

City State Zip Code
Miami Beach FL 33140-2814

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

Name of Employer Retired/Homemaker Occupation Retired/Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2009

Transaction ID: A-C15731

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Dr. Irving Moskowitz, M.D.

Mailing Address 4744 N Bay Road

City State Zip Code
Miami Beach FL 33140-2814

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

Name of Employer Self-Employed Occupation Retired Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2009

Transaction ID: A-C15730

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Dr. Irving Moskowitz, M.D.

Mailing Address 4744 N Bay Road

City State Zip Code
Miami Beach FL 33140-2814

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

Name of Employer Self-Employed Occupation Retired Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 15 / 2009

Transaction ID: A-C15732

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Nancy J. Mulick
Mailing Address 187 Cort Lane
City Tavernier State FL Zip Code 33070-3002
FEC ID number of contributing federal political committee. **C**
Name of Employer Nicholas W. Mulick, P.A. Occupation Office Manager
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
50.00
Date of Receipt: 09 / 13 / 2009
Transaction ID: A-C15874
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Nicholas W. Mulick
Mailing Address 187 Cort Lane
City Tavernier State FL Zip Code 33070-3002
FEC ID number of contributing federal political committee. **C**
Name of Employer Mr. Nicholas W. Mulick, Esq. Occupation Attorney At Law
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
50.00
Date of Receipt: 09 / 13 / 2009
Transaction ID: A-C15873
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Nodal
Mailing Address 900 Bay Drive Apt. 817
City Miami Beach State FL Zip Code 33141-5633
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Dept. of HHS Occupation Supervisory Program Analyst
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00
Date of Receipt: 08 / 29 / 2009
Transaction ID: A-C15791
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**
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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Anne M. O'Bannon

Mailing Address PO Box 510016

City State Zip Code
Key Colony Beach FL 33051-0016

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

Name of Employer Occupation
Morning Mix Radio Host

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15888

Amount of Each Receipt this Period
25.00

25.00

B. Full Name (Last, First, Middle Initial)
Mrs. Marta Olchyk

Mailing Address 9341 Collins Avenue
Apt. 508

City State Zip Code
Surfside FL 33154-2661

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15932

Amount of Each Receipt this Period
100.00

100.00

C. Full Name (Last, First, Middle Initial)
Mr. Isaac Olemberg

Mailing Address 5212 N Bay Road

City State Zip Code
Miami Beach FL 33140-2011

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

Name of Employer Occupation
Olem Shoe Corp. Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15844

Amount of Each Receipt this Period
2400.00

4800.00

SUBTOTAL of Receipts This Page (optional) ► **2525.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Nieves Olembeg

Mailing Address 800 NW 21st Street

City Miami State FL Zip Code 33127-4626

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

Name of Employer Olem Shoe Corporation Occupation Secretary/Treasurer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 08 / 29 / 2009
Transaction ID: A-C15845
 Amount of Each Receipt this Period 2400.00

B. Full Name (Last, First, Middle Initial)
Ms. Beatriz Osorio

Mailing Address 14002 SW 161st Terrace

City Miami State FL Zip Code 33177-1916

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

Name of Employer Fabric Innovations Occupation Project Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt 08 / 17 / 2009
Transaction ID: A-C15739
 Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Felisa V. Pacheco

Mailing Address 630 SW 29th Road

City Miami State FL Zip Code 33129-2530

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2009
Transaction ID: A-C15792
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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 59 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Rosie S. Pardo

Mailing Address PO Box 557605

City State Zip Code
Miami FL 33255-7605

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

Name of Employer Occupation
DMR Corp. Rehab Assistant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	9

Transaction ID: A-C15761

Amount of Each Receipt this Period
2000.00

Election Cycle-to-Date ▼ 2000.00

B. Full Name (Last, First, Middle Initial)
Mr. Emilio C. Pastor, Esq.

Mailing Address 7660 SW 73rd Place

City State Zip Code
Miami FL 33143-4142

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

Name of Employer Occupation
Emilio C. Pastor, PA Attorney At Law

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	9

Transaction ID: A-C15764

Amount of Each Receipt this Period
200.00

Election Cycle-to-Date ▼ 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Kristan Patton

Mailing Address 1900 SW 87th Place

City State Zip Code
Miami FL 33165-8223

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

Name of Employer Occupation
Horizons International Translator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C15827

Amount of Each Receipt this Period
20.00

Election Cycle-to-Date ▼ 20.00

SUBTOTAL of Receipts This Page (optional) ► **2220.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Leonard J. Pearson

Mailing Address 3320 N 34th Street

City State Zip Code
Hollywood FL 33021-2506

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

Name of Employer Occupation
Pearson Antiques & Investments President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15899

Amount of Each Receipt this Period
1000.00

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Maria J. Perez

Mailing Address 8816 SW 6th Street

City State Zip Code
Miami FL 33174-2460

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2009

Transaction ID: A-C15504

Amount of Each Receipt this Period
100.00

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Pedro Perez-Roura

Mailing Address 1688 West Avenue
Apt. 503

City State Zip Code
Miami Beach FL 33139-2367

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

Name of Employer Occupation
St. Thomas University Student

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15816

Amount of Each Receipt this Period
40.00

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **1140.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. James G. Pettorini

Mailing Address PO Box 510433

City State Zip Code
Key Col Bch FL 33051-0433

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 13 / 2009
Transaction ID: A-C15875
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Paula G. Pettorini

Mailing Address PO Box 510433

City State Zip Code
Key Col Bch FL 33051-0433

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 13 / 2009
Transaction ID: A-C15876
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Ms. Romy L. Portuondo

Mailing Address 1231 Dickinson Drive
Room 1218

City State Zip Code
Coral Gables FL 33146-2538

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

Name of Employer University of Miami Occupation Student

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 01 / 2009
Transaction ID: A-C15813
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 62 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Raymond Rhash

Mailing Address PO Box 588

City State Zip Code
Tavernier FL 33070-0588

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

Name of Employer Occupation
Florida Keys Blot Co-op Rate Analyst

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15887

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Juan Carlos Robaina

Mailing Address 8425 SW 48th Street

City State Zip Code
Miami FL 33155-5416

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

Name of Employer Occupation
Florida International Uni- Student

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15828

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Dr. David A. Rodriguez, M.D.

Mailing Address 10900 Old Cutler Road

City State Zip Code
Coral Gables FL 33156-4234

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

Name of Employer Occupation
Dadeland Medical Group Dermatologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-C15760

Amount of Each Receipt this Period
1600.00

SUBTOTAL of Receipts This Page (optional) ► **1670.00**

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 / 112

(check only one)

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

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Dr. David A. Rodriguez, M.D.

Mailing Address 10900 Old Cutler Road

City State Zip Code
Coral Gables FL 33156-4234

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

Name of Employer Occupation
Dadeland Medical Group Dermatologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2009

Transaction ID: A-I15786

Amount of Each Receipt this Period

400.00

Inkind: Caterer

B.

Full Name (Last, First, Middle Initial)
Ms. Yildris Rodriguez

Mailing Address 3101 S Ocean Drive
Apt. 1005

City State Zip Code
Hollywood FL 33019-2807

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

Name of Employer Occupation
Miami Dolphins Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 20.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 25 / 2009

Transaction ID: A-C16019

Amount of Each Receipt this Period

20.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Mrs. Deborah Herman Romano

Mailing Address 3574 West Fairview Street
569

City State Zip Code
Miami FL 33133-4048

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

Name of Employer Occupation
Fabric Innovations President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1218.46

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2009

Transaction ID: A-C15759

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1420.00

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 64 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Deborah Herman Romano

Mailing Address 3574 West Fairview Street
569

City Miami State FL Zip Code 33133-4048

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

Name of Employer Fabric Innovations Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1218.46

Date of Receipt 08 / 17 / 2009
Transaction ID: A-I15778
 Amount of Each Receipt this Period 218.46
 Inkind: Caterer

B. Full Name (Last, First, Middle Initial)
Mr. Hector Roos

Mailing Address 7740 Camino Real
Apt. G-308

City Miami State FL Zip Code 33143-7160

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

Name of Employer Talcott Systems, LLC Occupation Software Engineer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 40.00

Date of Receipt 09 / 01 / 2009
Transaction ID: A-C15817
 Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Mr. Daniel Rosen

Mailing Address 126 E 56th Street
Floor 24

City New York State NY Zip Code 10022-3687

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

Name of Employer Rosen Partners Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 11 / 2009
Transaction ID: A-C16010
 Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 2258.46

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 65 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Jack Rosen

Mailing Address 18 East 85th Street

City State Zip Code
New York NY 10028-0408

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

Name of Employer Occupation
Rosen Partners, LLC Partner; Diplomat

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: A-C16006

Amount of Each Receipt this Period
2000.00

2144.93

B. Full Name (Last, First, Middle Initial)
Mr. Jordan Rosen

Mailing Address 300 E 75th Street
Apt. 24L

City State Zip Code
New York NY 10021-3379

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

Name of Employer Occupation
Rosen Partners Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: A-C16007

Amount of Each Receipt this Period
2000.00

2000.00

C. Full Name (Last, First, Middle Initial)
Mr. Marvin Rosenzweig

Mailing Address 90 Woodbridge Ctr Drive
Floor 6

City State Zip Code
Woodbridge NJ 07095-1163

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

Name of Employer Occupation
Westminster Arms LLC President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 29 / 2009

Transaction ID: A-C16037

Amount of Each Receipt this Period
2400.00

Contribution
2400.00

SUBTOTAL of Receipts This Page (optional) ► **6400.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Betty Ruano

Mailing Address 1590 W 46th Street
Apt. 235

City Hialeah State FL Zip Code 33012-7140

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

Name of Employer Little Havana Act. Center Occupation Executive Assistant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 01 / 2009
Transaction ID: A-C15829
 Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Mr. Todd A. Ruderman

Mailing Address 9101 NW 7th Avenue

City Miami State FL Zip Code 33150-2001

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

Name of Employer Tarco Properties Occupation Real Estate Professional

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 14 / 2009
Transaction ID: A-C15916
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Israel J. Sachs

Mailing Address 290 174th Street
Apt. 2009

City Sunny Isles Beach State FL Zip Code 33160-3256

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 14 / 2009
Transaction ID: A-C15928
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **645.00**

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 67 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Jennifer M. Safstrom

Mailing Address 1207 Alhambra Circle

City State Zip Code
Coral Gables FL 33134-3531

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

Name of Employer Occupation
University of Miami Student

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15814

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Mr. Carlos Santiesteban, Jr.

Mailing Address 5571 SW 70th Place S

City State Zip Code
Miami FL 33155-5649

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

Name of Employer Occupation
Dade County PBA Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15838

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. David Schaecter

Mailing Address 3 Grove Isle Drive
Apt. 310

City State Zip Code
Miami FL 33133-4109

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

Name of Employer Occupation
MuseoVault Investor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15900

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ► **620.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

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

Mailing Address 3 Grove Isle Drive
Apt. 310

City Miami State FL Zip Code 33133-4109

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

Name of Employer MuseoVault Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2750.00

Date of Receipt 09 / 14 / 2009
Transaction ID: A-C15901
 Amount of Each Receipt this Period 650.00

B. Full Name (Last, First, Middle Initial)
Mr. Leroy Schechter

Mailing Address 12000 Biscayne Boulevard
Suite 803

City North Miami State FL Zip Code 33181-2727

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

Name of Employer Get a Room, Inc. Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 09 / 17 / 2009
Transaction ID: A-C15944
 Amount of Each Receipt this Period 2400.00

C. Full Name (Last, First, Middle Initial)
Mrs. Leigh Bishop Seigel

Mailing Address 6120 SW 121st Street

City Miami State FL Zip Code 33156-5623

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 09 / 14 / 2009
Transaction ID: A-C15923
 Amount of Each Receipt this Period 200.00

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 69 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Barry J. Silverman, M.D.

Mailing Address 2801 NE 208th Terrace
Suite 102

City State Zip Code
Aventura FL 33180-1428

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

Name of Employer Occupation
Barry J. Silverman, M.D., Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15902

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Leonard Simkovitz

Mailing Address 8885 SW 78th Court

City State Zip Code
Miami FL 33156-7561

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

Name of Employer Occupation
Aviation Capital Leasing, Inc. CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2009

Transaction ID: A-C15943

Amount of Each Receipt this Period
3400.00

C. Full Name (Last, First, Middle Initial)
Mr. Cale Smith

Mailing Address 209 Palm Avenue

City State Zip Code
Islamorada FL 33036-3738

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

Name of Employer Occupation
Islamorada Investment Mng-rs. Portfolio Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15877

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Sheila Smith

Mailing Address 3511 N 52nd Avenue

City State Zip Code
Hollywood FL 33021-2331

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

Name of Employer Retired Occupation Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	9

Transaction ID: A-C15919

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jerry J. Sokol

Mailing Address 437 N Hibiscus Drive

City State Zip Code
Miami Beach FL 33139-5125

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

Name of Employer McDermot Will & Emery Occupation Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	9

Transaction ID: A-C15917

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
The Hon. Ken Sorensen

Mailing Address P.O.Box 754

City State Zip Code
Key Largo FL 33037-0754

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

Name of Employer Retired Occupation Retired State Representative/Pilot

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: A-C15878

Amount of Each Receipt this Period
100.00

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 71 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Osvaldo N. Soto, Esq.
Mailing Address 1535 Mercado Avenue
City State Zip Code
Coral Gables FL 33146-1033
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Osvaldo Soto, P.A. Attorney
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 50.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009
Transaction ID: A-C15806
Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Spencer
Mailing Address 999 Ponce De Leon Boulevard
Suite 510
City State Zip Code
Coral Gables FL 33134-3037
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Thomas R. Spencer, Esq. Attorney
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00
Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009
Transaction ID: A-C15753
Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Dr. Ava Stegall, M.D.
Mailing Address 228 Buttonwood Lane
City State Zip Code
Tavernier FL 33070-2729
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Monroe County Health Dept. Physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 80.00
Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009
Transaction ID: A-C15864
Amount of Each Receipt this Period
80.00

SUBTOTAL of Receipts This Page (optional) ► 330.00
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 72 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Ms. Rebecca Strylom

Mailing Address PO Box 373141

City State Zip Code
Key Largo FL 33037-8141

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

Name of Employer Insurance Associates Occupation Insurance Agent

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: A-C15865

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)
Ms. Lynn M. Summers

Mailing Address 5807 SW 82nd Street

City State Zip Code
South Miami FL 33143-8213

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

Name of Employer Community Technologies Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	9

Transaction ID: A-C15736

Amount of Each Receipt this Period

100.00

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

Mailing Address 1175 NE 125th Street Suite 102

City State Zip Code
North Miami FL 33161-5009

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

Name of Employer Tate Enterprises Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	9

Transaction ID: A-C15733

Amount of Each Receipt this Period

1400.00

SUBTOTAL of Receipts This Page (optional) ►

1530.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 / 112
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Stanley Tate	Date of Receipt MM / DD / YYYY 08 / 15 / 2009
	Mailing Address 1175 NE 125th Street Suite 102	Transaction ID: A-C15734
	City State Zip Code North Miami FL 33161-5009	Amount of Each Receipt this Period 900.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Tate Enterprises Occupation President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3800.00	

B.	Full Name (Last, First, Middle Initial) Ms. Virginia A. Taylor	Date of Receipt MM / DD / YYYY 08 / 15 / 2009
	Mailing Address 26 NE 108th Street	Transaction ID: A-C15765
	City State Zip Code Miami Shores FL 33161-7036	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 100.00	

C.	Full Name (Last, First, Middle Initial) Mr. James D. Thomas	Date of Receipt MM / DD / YYYY 08 / 17 / 2009
	Mailing Address 450 Alton Road Apt. 2907	Transaction ID: A-C15755
	City State Zip Code Miami Beach FL 33139-6762	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Squire, Sanders & Dempsey, LLP Occupation Attorney Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00	

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 74 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Takero M. Toyama, D.O.
Mailing Address 6866 SW 89th Terrace

City State Zip Code
Miami FL 33156-1563

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

Name of Employer Self Employed Occupation
Self Employed Doctor of Osteopathic Medicine

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15933

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Catherine Triana
Mailing Address 2801 SW 5th Avenue

City State Zip Code
Miami FL 33129-2502

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

Name of Employer Self-Employed Occupation
Self-Employed Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15793

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Ponciano Triana
Mailing Address 2801 SW 5th Avenue

City State Zip Code
Miami FL 33129-2502

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

Name of Employer Retired Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15794

Amount of Each Receipt this Period
100.00

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 75 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Sylvia Ulrich

Mailing Address 235 Solano Prado

City State Zip Code
Coral Gables FL 33156-2351

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

Name of Employer Occupation
Westchester General Hospital President/Chairman of the Board

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2009

Transaction ID: A-C16015

Amount of Each Receipt this Period
500.00

3400.00

B. Full Name (Last, First, Middle Initial)
Dr. David Varlotta, M.D.

Mailing Address 1303 Bayshore Boulevard

City State Zip Code
Tampa FL 33606-2911

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

Name of Employer Occupation
Am. Society Anesthesiologists Medical Doctor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C16021

Amount of Each Receipt this Period
100.00

Contribution

100.00

C. Full Name (Last, First, Middle Initial)
Dr. Albert Joseph Varon, M.D.

Mailing Address 16389 SW 77th Court

City State Zip Code
Palmetto Bay FL 33157-0703

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

Name of Employer Occupation
UM Division of Trauma Anaesthesiologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2009

Transaction ID: A-C15925

Amount of Each Receipt this Period
150.00

150.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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 76 / 112

(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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Milagros R. Vazquez

Mailing Address 901 Ponce De Leon Boulevard
Suite 204

City State Zip Code
Coral Gables FL 33134-3075

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

Name of Employer Occupation
Milagros R. Vazquez, PA Attorney At Law

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 100.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 15 / 2009

Transaction ID: A-C15766

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Antonio G. Vega

Mailing Address PO Box 524066

City State Zip Code
Miami FL 33152-4066

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

Name of Employer Occupation
Electronic Forkupt Service Electronic Technician

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 40.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15818

Amount of Each Receipt this Period

40.00

C.

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

Mailing Address 1256 Sorolla Avenue

City State Zip Code
Coral Gables FL 33134-3516

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

Name of Employer Occupation
Washington Economics Group Businessman

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 29 / 2009

Transaction ID: A-C15795

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

390.00

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 77 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Dr. Charles E. Virgin, M.D.

Mailing Address 2700 SW 3rd Avenue
Suite 1B

City Miami State FL Zip Code 33129-2318

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

Name of Employer Charles E. Virgin, M.D. Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2009
Transaction ID: A-C16016
 Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark R. Vogel, Esq.

Mailing Address 4000 Hollywood Boulevard
Suite 265

City Hollywood State FL Zip Code 33021-6782

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

Name of Employer Mark R. Vogel Law Office Occupation Attorney At Law

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 09 / 14 / 2009
Transaction ID: A-C15918
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Susan B. Vogel

Mailing Address 3389 Sheridan Street
Suite 424

City Hollywood State FL Zip Code 33021-3606

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

Name of Employer Susan Vogel, Real Estate Bro Occupation Real Estate Broker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2009
Transaction ID: A-C16036
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Robert Watson

Mailing Address 777 NE 62nd Street
Apt. C402

City State Zip Code
Miami FL 33138-6400

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

Name of Employer Occupation
Holland & Knight, LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2009

Transaction ID: A-C15830

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Mr. Malcolm B. Wiseheart, Jr.

Mailing Address 2840 SW 3rd Avenue

City State Zip Code
Miami FL 33129-2317

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

Name of Employer Occupation
The Wiseheart Foundation Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-C15756

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Rafael A. Yaniz

Mailing Address 5861 SW 91st Avenue

City State Zip Code
Miami FL 33173-1642

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

Name of Employer Occupation
Univ of FL; Apple Store Student; Sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-I15783

Amount of Each Receipt this Period
40.00

Inkind: Caterers Tips

SUBTOTAL of Receipts This Page (optional) ► **260.00**

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 79 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Mr. Rafael A. Yaniz

Mailing Address 5861 SW 91st Avenue

City State Zip Code
Miami FL 33173-1642

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Univ of FL; Apple Store Student; Sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 112.22

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-I15784

Amount of Each Receipt this Period
52.22

Inkind: Glassware Rental

B. Full Name (Last, First, Middle Initial)
Mr. Rafael A. Yaniz

Mailing Address 5861 SW 91st Avenue

City State Zip Code
Miami FL 33173-1642

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Univ of FL; Apple Store Student; Sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 112.22

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 17 / 2009

Transaction ID: A-I15785

Amount of Each Receipt this Period
20.00

Inkind: La Deliciosa Bake-ry pastelitos

C. Full Name (Last, First, Middle Initial)
Mr. Ronald C. Zaleski

Mailing Address 42 Ocean Drive

City State Zip Code
Key Largo FL 33037-4034

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
USCensus;Thelongwalkhome.-org Census Taker; Community Advocate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2009

Transaction ID: A-C15879

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) 172.22

TOTAL This Period (last page this line number only) 104300.68

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

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

FOR LINE NUMBER: PAGE 80 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
American Optometric Association PAC (AOA-PAC)

Mailing Address 1505 Prince Street
Suite 300

City State Zip Code
Alexandria VA 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: A-C15895

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Society Of Anesthesiologists Political Action Committee

Mailing Address 520 North Highway

City State Zip Code
Park Ridge IL 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 4 / 2 0 0 9

Transaction ID: A-C15897

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Build Political Action Committee of the National Association of Home Builders

Mailing Address 1201 15th Street NW

City State Zip Code
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: A-C15789

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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 81 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
Florida Congressional Committee (FCCPAC)
 Mailing Address 5821 Hollywood Boulevard
Suite 200
 City Hollywood State FL Zip Code 33021-6308
 Date of Receipt 09 / 14 / 2009
Transaction ID: A-C15898
 Amount of Each Receipt this Period 1500.00
 FEC ID number of contributing federal political committee. **C** C00127811
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date 2500.00
 Primary General
 Other (specify) ▼

B. Full Name (Last, First, Middle Initial)
FREEDOM & DEMOCRACY FUND
 Mailing Address 610 S Boulevard
 City Tampa State FL Zip Code 33606-2693
 Date of Receipt 08 / 29 / 2009
Transaction ID: A-C15788
 Amount of Each Receipt this Period 2500.00
 FEC ID number of contributing federal political committee. **C** C00409987
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date 2500.00
 Primary General
 Other (specify) ▼

C. Full Name (Last, First, Middle Initial)
NATIONAL ACTION COMMITTEE (NACPAC)
 Mailing Address 3389 Sheridan Street
Suite 424
 City Hollywood State FL Zip Code 33021-3606
 Date of Receipt 09 / 14 / 2009
Transaction ID: A-C15896
 Amount of Each Receipt this Period 2000.00
 FEC ID number of contributing federal political committee. **C** C00147983
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date 7500.00
 Primary General
 Other (specify) ▼

SUBTOTAL of Receipts This Page (optional) ► 6000.00
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 82 / 112
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
WASHINGTON POLITICAL ACTION COMMITTEE

Mailing Address 444 N Capitol Street NW
Suite 345

City State Zip Code
Washington DC 20001-1538

FEC ID number of contributing federal political committee. **C** C00138560

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2009

Transaction ID: A-C15727

Amount of Each Receipt this Period
4000.00

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	15000.00

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

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

FOR LINE NUMBER: PAGE 83 / 112
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
E*Trade Financial

Mailing Address PO Box 1542

City State Zip Code
Merrifield VA 22116-1542

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2879.53

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 09 / 2009

Transaction ID: A-M15426

Amount of Each Receipt this Period
155.72

SUBTOTAL of Receipts This Page (optional)	▶	155.72
TOTAL This Period (last page this line number only)	▶	155.72

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)
Ros-Lehtinen For Congress

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

Mailing Address PO Box 619616

City Dfw Airport State TX Zip Code 75261-9616

Purpose of Disbursement
Travel Expense

Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: B-E-16057
Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

575.00

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

Mailing Address 6341 NW 87th Avenue

City Miami State FL Zip Code 33178-1626

Purpose of Disbursement
Printing Expenses

Candidate Name

007
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: B-E-15958
Date of Disbursement

07 / 10 / 2009

Amount of Each Disbursement this Period

1971.24

C. Full Name (Last, First, Middle Initial)
Aristotle International Inc

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Campaign Reporting Program

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: B-E-15982
Date of Disbursement

08 / 02 / 2009

Amount of Each Disbursement this Period

1950.00

SUBTOTAL of Disbursements This Page (optional) ▶

4496.24

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 105503 City Atlanta State GA Zip Code 30348-5503 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15589 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 86.66 Category/Type: 001
B. Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 105503 City Atlanta State GA Zip Code 30348-5503 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15971 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 38.73 Category/Type: 001
C. Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 105773 City Atlanta State GA Zip Code 30348-5773 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15972 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 205.95 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶

331.34

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)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial) AT&T <hr/> Mailing Address PO Box 105773 <hr/> City Atlanta State GA Zip Code 30348-5773 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15983 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 33.29
	001 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) AT&T <hr/> Mailing Address PO Box 105773 <hr/> City Atlanta State GA Zip Code 30348-5773 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15993 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 33.09
	001 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) AT&T <hr/> Mailing Address PO Box 105773 <hr/> City Atlanta State GA Zip Code 30348-5773 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16004 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 48.95
	001 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

115.33

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 105773 City Atlanta State GA Zip Code 30348-5773 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16065 Date of Disbursement 09 / 29 / 2009 Amount of Each Disbursement this Period 421.39 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Campaign Secrets LLC Mailing Address 1765 Ridgemill Terrace City Dacula State GA Zip Code 30019-2952 Purpose of Disbursement Internet Handling Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16066 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 35.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Campaign Secrets LLC Mailing Address 1765 Ridgemill Terrace City Dacula State GA Zip Code 30019-2952 Purpose of Disbursement Internet Handling Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16067 Date of Disbursement 07 / 24 / 2009 Amount of Each Disbursement this Period 17.50 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

473.89

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)
Ros-Lehtinen For Congress

<p>A. Full Name (Last, First, Middle Initial) Campaign Secrets LLC</p> <p>Mailing Address 1765 Ridgemill Terrace</p> <p>City Dacula State GA Zip Code 30019-2952</p> <p>Purpose of Disbursement Internet Handling Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-16045</p> <p>Date of Disbursement 08 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 17.50</p>
<p>B. Full Name (Last, First, Middle Initial) Campaign Secrets LLC</p> <p>Mailing Address 1765 Ridgemill Terrace</p> <p>City Dacula State GA Zip Code 30019-2952</p> <p>Purpose of Disbursement Internet Handling Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-16046</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 52.50</p>
<p>C. Full Name (Last, First, Middle Initial) Campaign Secrets LLC</p> <p>Mailing Address 1765 Ridgemill Terrace</p> <p>City Dacula State GA Zip Code 30019-2952</p> <p>Purpose of Disbursement Internet Handling Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-16064</p> <p>Date of Disbursement 09 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 14.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

84.00

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)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial) Campaign Secrets LLC <hr/> Mailing Address 1765 Ridgemill Terrace <hr/> City Dacula State GA Zip Code 30019-2952 <hr/> Purpose of Disbursement Internet Handling Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16058 Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2009
	Amount of Each Disbursement this Period 245.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Campaign Secrets LLC <hr/> Mailing Address 1765 Ridgemill Terrace <hr/> City Dacula State GA Zip Code 30019-2952 <hr/> Purpose of Disbursement Internet Handling Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16054 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2009
	Amount of Each Disbursement this Period 71.40
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Cash <hr/> Mailing Address PO Box 522784 <hr/> City Miami State FL Zip Code 33152-2784 <hr/> Purpose of Disbursement Petty Cash Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15975 Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2009
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	416.40
TOTAL This Period (last page this line number only) ▶	(Empty)

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Cash	Transaction ID: B-E-15997 Date of Disbursement
	Mailing Address PO Box 522784	<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Miami State FL Zip Code 33152-2784	Amount of Each Disbursement this Period
	Purpose of Disbursement Petty Cash Candidate Name	<input type="text" value="100.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Cash	Transaction ID: B-E-16053 Date of Disbursement
	Mailing Address PO Box 522784	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Miami State FL Zip Code 33152-2784	Amount of Each Disbursement this Period
	Purpose of Disbursement Petty Cash Candidate Name	<input type="text" value="100.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value=""/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Design & Promotions Corporation	Transaction ID: B-E-15969 Date of Disbursement
	Mailing Address 12333 SW 132nd Court	<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Miami State FL Zip Code 33186-6452	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing Candidate Name	<input type="text" value="947.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="007"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1147.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Design & Promotions Corporation

Transaction ID: B-E-16048
Date of Disbursement

Mailing Address 12333 SW 132nd Court

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	9

City Miami State FL Zip Code 33186-6452

Amount of Each Disbursement this Period

Purpose of Disbursement
Printing

007
Category/ Type

800.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Express Travel

Transaction ID: B-E-16039
Date of Disbursement

Mailing Address 5000 SW 75th Avenue Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	0	9

City Miami State FL Zip Code 33155-4468

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Expense

002
Category/ Type

620.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Express Travel

Transaction ID: B-E-16073
Date of Disbursement

Mailing Address 5000 SW 75th Avenue Suite 300

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	9

City Miami State FL Zip Code 33155-4468

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Expense

002
Category/ Type

649.21

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2069.21

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Express Travel Mailing Address 5000 SW 75th Avenue Suite 300 City Miami State FL Zip Code 33155-4468 Purpose of Disbursement Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16061 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>0</td><td>9</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">329.20</td> </tr> </table> Category/Type: 002	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	9	329.20
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	0		2	0	0	9														
329.20																							
B.	Full Name (Last, First, Middle Initial) Fairmont Turnberry Isle Resort Mailing Address 19999 W Country Club Drive City Aventura State FL Zip Code 33180-2401 Purpose of Disbursement Venue Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15966 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>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> Category/Type: 007	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	4		2	0	0	9														
2500.00																							
C.	Full Name (Last, First, Middle Initial) Fairmont Turnberry Isle Resort Mailing Address 19999 W Country Club Drive City Aventura State FL Zip Code 33180-2401 Purpose of Disbursement Venue Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15970 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>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">4500.00</td> </tr> </table> Category/Type: 007	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	9	4500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	4		2	0	0	9														
4500.00																							

SUBTOTAL of Disbursements This Page (optional) ▶

7329.20

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Fed Ex Corporation Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Courier Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15985 Date of Disbursement 08 / 02 / 2009 Amount of Each Disbursement this Period 6.15 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Fed Ex Corporation Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Courier Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15987 Date of Disbursement 08 / 17 / 2009 Amount of Each Disbursement this Period 21.69 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Fed Ex Corporation Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Courier Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15988 Date of Disbursement 08 / 17 / 2009 Amount of Each Disbursement this Period 6.39 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	34.23
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Fed Ex Corporation	Transaction ID: B-E-16003 Date of Disbursement
	Mailing Address PO Box 1140	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101-1140	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier Expense Candidate Name	<input type="text" value="14.04"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Fed Ex Corporation	Transaction ID: B-E-16005 Date of Disbursement
	Mailing Address PO Box 1140	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Memphis State TN Zip Code 38101-1140	Amount of Each Disbursement this Period
	Purpose of Disbursement Courier Expense Candidate Name	<input type="text" value="9.14"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Florida Department of Revenue	Transaction ID: B-E-16001 Date of Disbursement
	Mailing Address 5050 W Tennessee Street	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Tallahassee State FL Zip Code 32399-0135	Amount of Each Disbursement this Period
	Purpose of Disbursement Taxes, Form 1120 Candidate Name	<input type="text" value="1241.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1264.18"/>
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)
Ros-Lehtinen For Congress

<p>A. Full Name (Last, First, Middle Initial) Florida Unemployment Compensation Fund</p> <p>Mailing Address 5050 W Tennessee Street</p> <p>City Tallahassee State FL Zip Code 32399-0180</p> <p>Purpose of Disbursement Taxes, UCT-6</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-15978</p> <p>Date of Disbursement MM / DD / YYYY 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 101.25</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Frame Art of Kendall, Inc.</p> <p>Mailing Address 11758 SW 88th Street</p> <p>City Miami State FL Zip Code 33186-2102</p> <p>Purpose of Disbursement Supplies - Framing</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-16042</p> <p>Date of Disbursement MM / DD / YYYY 07 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 214.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Frame Art of Kendall, Inc.</p> <p>Mailing Address 11758 SW 88th Street</p> <p>City Miami State FL Zip Code 33186-2102</p> <p>Purpose of Disbursement Supplies - Framing</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-16069</p> <p>Date of Disbursement MM / DD / YYYY 07 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 139.10</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

454.35

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Hunan Dynasty Restaurant Mailing Address 215 Pennsylvania Avenue SE City Washington State DC Zip Code 20003-1155 Purpose of Disbursement Food - Event Expense Candidate Name 007 Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16071 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">137.30</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	0	9													
B.	Full Name (Last, First, Middle Initial) Morgan, Meredith and Associates, Inc. Mailing Address 2875 Towerview Road Suite 1000 City Herndon State VA Zip Code 20171-5403 Purpose of Disbursement Event Management Candidate Name 007 Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16002 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">236.67</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	5		2	0	0	9													
C.	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 2952 NE 8th Street City Homestead State FL Zip Code 33033-5694 Purpose of Disbursement Office Supplies Candidate Name 001 Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-15965 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">57.75</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	4		2	0	0	9													

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; width: 100%;">431.72</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Office Max Mailing Address 8740 SW 40th Street City Miami State FL Zip Code 33165-5470 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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15980 Date of Disbursement 08 / 05 / 2009 Amount of Each Disbursement this Period 1357.82 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Por Fin Restaurant Mailing Address 2500 Ponce De Leon Boulevard City Coral Gables State FL Zip Code 33134-6013 Purpose of Disbursement Venue Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16059 Date of Disbursement 09 / 16 / 2009 Amount of Each Disbursement this Period 1969.28 007 Category/ Type
C.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address U.S.P.S. - General Mail Facility 2200 NW 72nd Avenue City Miami State FL Zip Code 33152-9001 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15638 Date of Disbursement 07 / 11 / 2009 Amount of Each Disbursement this Period 1260.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

4587.10

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)
Ros-Lehtinen For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Sun Trust Bank</p> <p>Mailing Address VA-RIC-9292, P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261-7572</p> <p>Purpose of Disbursement Taxes, Form 1120POL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-16000</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="255.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Sun Trust Bank</p> <p>Mailing Address VA-RIC-9292, P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261-7572</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-16076</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="47.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sun Trust Bank</p> <p>Mailing Address VA-RIC-9292, P.O. Box 27572</p> <p>City Richmond State VA Zip Code 23261-7572</p> <p>Purpose of Disbursement Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B-E-16077</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="44.04"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="346.04"/>
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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address 8699 NW 36th Street City Doral State FL Zip Code 33166-6621 Purpose of Disbursement Account Analysis Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16044 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 40.00
B.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address 8699 NW 36th Street City Doral State FL Zip Code 33166-6621 Purpose of Disbursement Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16043 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 7.95
C.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address 8699 NW 36th Street City Doral State FL Zip Code 33166-6621 Purpose of Disbursement Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16047 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 6.31

SUBTOTAL of Disbursements This Page (optional) ▶

54.26

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 100 / 112

<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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address 8699 NW 36th Street City Doral State FL Zip Code 33166-6621 Purpose of Disbursement Deposit Correction Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16056 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 9	Amount of Each Disbursement this Period 6.00
B.	Full Name (Last, First, Middle Initial) T-Mobile Mailing Address PO Box 790047 City Saint Louis State MO Zip Code 63179-0047 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15984 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 9	Amount of Each Disbursement this Period 379.35
C.	Full Name (Last, First, Middle Initial) T-Mobile Mailing Address PO Box 790047 City Saint Louis State MO Zip Code 63179-0047 Purpose of Disbursement Telephone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-16083 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 496.63

SUBTOTAL of Disbursements This Page (optional) ▶

881.98

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 101 / 112

<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)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial) T-Mobile <hr/> Mailing Address PO Box 790047 <hr/> City Saint Louis State MO Zip Code 63179-0047 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15989 Date of Disbursement MM / DD / YYYY 08 / 17 / 2009
	Amount of Each Disbursement this Period 9.82
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) T-Mobile <hr/> Mailing Address PO Box 790047 <hr/> City Saint Louis State MO Zip Code 63179-0047 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15991 Date of Disbursement MM / DD / YYYY 09 / 01 / 2009
	Amount of Each Disbursement this Period 370.63
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) T-Mobile <hr/> Mailing Address PO Box 790047 <hr/> City Saint Louis State MO Zip Code 63179-0047 <hr/> Purpose of Disbursement Telephone Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15996 Date of Disbursement MM / DD / YYYY 09 / 28 / 2009
	Amount of Each Disbursement this Period 429.09
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

809.54

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Tamiami Canal Co. LLC	Transaction ID: B-E-15981 Date of Disbursement 08 / 02 / 2009
	Mailing Address 12134 SW 117th Court	Amount of Each Disbursement this Period 925.02
	City Miami State FL Zip Code 33186-5225	
	Purpose of Disbursement Rent Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tamiami Canal Co. LLC	Transaction ID: B-E-15992 Date of Disbursement 08 / 28 / 2009
	Mailing Address 12134 SW 117th Court	Amount of Each Disbursement this Period 925.02
	City Miami State FL Zip Code 33186-5225	
	Purpose of Disbursement Rent Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Trias Florist, Antiques and Gifts	Transaction ID: B-E-16041 Date of Disbursement 07 / 17 / 2009
	Mailing Address 6520 Bird Road	Amount of Each Disbursement this Period 70.57
	City Miami State FL Zip Code 33155-4830	
	Purpose of Disbursement Flowers Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1920.61
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)

<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)
Ros-Lehtinen For Congress

A. Full Name (Last, First, Middle Initial)
US Treasury - Internal Revenue Service

Mailing Address PO Box 660264

City Dallas State TX Zip Code 75266-0264

Purpose of Disbursement
Taxes, Form 941

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-15977

Date of Disbursement

07 / 24 / 2009

Amount of Each Disbursement this Period

755.66

B. Full Name (Last, First, Middle Initial)
USPS Miami Division

Mailing Address 2200 NW 72nd Avenue

City Miami State FL Zip Code 33152-9001

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-16049

Date of Disbursement

08 / 20 / 2009

Amount of Each Disbursement this Period

915.00

C. Full Name (Last, First, Middle Initial)
USPS Miami Division

Mailing Address 2200 NW 72nd Avenue

City Miami State FL Zip Code 33152-9001

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-16050

Date of Disbursement

08 / 20 / 2009

Amount of Each Disbursement this Period

690.07

SUBTOTAL of Disbursements This Page (optional) ▶

2360.73

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Ros-Lehtinen For Congress

<p>A. Full Name (Last, First, Middle Initial) Ms. Harriet Carter</p> <p>Mailing Address 9357 Fontainebleau Boulevard Apt. D202</p> <p>City Miami State FL Zip Code 33172-4228</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-15598</p> <p>Date of Disbursement 07 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 185.95</p> <p>002 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Harriet Carter</p> <p>Mailing Address 9357 Fontainebleau Boulevard Apt. D202</p> <p>City Miami State FL Zip Code 33172-4228</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-15994</p> <p>Date of Disbursement 09 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 127.30</p> <p>002 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Harriet Carter</p> <p>Mailing Address 9357 Fontainebleau Boulevard Apt. D202</p> <p>City Miami State FL Zip Code 33172-4228</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B-E-15995</p> <p>Date of Disbursement 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 94.45</p> <p>002 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

407.70

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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Edward Del Portillo

Transaction ID: B-E-16074
Date of Disbursement

Mailing Address 166 Wesmond Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	9	

City State Zip Code
Alexandria VA 22305-3034

Amount of Each Disbursement this Period

53.36

Purpose of Disbursement
Event Supplies Reimbursement
Candidate Name

007

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Maria Cristina Estopinan

Transaction ID: B-E-16070
Date of Disbursement

Mailing Address 9405 W Flagler Street
Apt. D307

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	9	

City State Zip Code
Miami FL 33174-2033

Amount of Each Disbursement this Period

302.70

Purpose of Disbursement
Travel Reimbursement
Candidate Name

002

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Keith Fernandez

Transaction ID: B-E-15961
Date of Disbursement

Mailing Address 15982 SW 3rd Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	9	

City State Zip Code
Pembroke Pines FL 33027-1154

Amount of Each Disbursement this Period

522.11

Purpose of Disbursement
Salary Expense
Candidate Name

001

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

878.17

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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Keith Fernandez

Transaction ID: B-E-15962
Date of Disbursement

Mailing Address 15982 SW 3rd Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	0	9

City State Zip Code
Pembroke Pines FL 33027-1154

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Reimbursement

002
Category/ Type

60.73

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Mr. Keith Fernandez

Transaction ID: B-E-15973
Date of Disbursement

Mailing Address 15982 SW 3rd Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	9

City State Zip Code
Pembroke Pines FL 33027-1154

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary Expense

001
Category/ Type

90.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Keith Fernandez

Transaction ID: B-E-15974
Date of Disbursement

Mailing Address 15982 SW 3rd Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	9

City State Zip Code
Pembroke Pines FL 33027-1154

Amount of Each Disbursement this Period

Purpose of Disbursement
Salary Expense

001
Category/ Type

552.11

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

702.84

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Keith Fernandez	Transaction ID: B-E-15967 Date of Disbursement 08 / 06 / 2009
	Mailing Address 15982 SW 3rd Street	Amount of Each Disbursement this Period 117.35
	City: Pembroke Pines, State: FL, Zip Code: 33027-1154	
	Purpose of Disbursement: Travel Reimbursement Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House, <input type="checkbox"/> Senate, <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary, <input type="checkbox"/> General, <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Keith Fernandez	Transaction ID: B-E-15986 Date of Disbursement 08 / 07 / 2009
	Mailing Address 15982 SW 3rd Street	Amount of Each Disbursement this Period 552.11
	City: Pembroke Pines, State: FL, Zip Code: 33027-1154	
	Purpose of Disbursement: Salary Expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House, <input type="checkbox"/> Senate, <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary, <input type="checkbox"/> General, <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Keith Fernandez	Transaction ID: B-E-15968 Date of Disbursement 08 / 21 / 2009
	Mailing Address 15982 SW 3rd Street	Amount of Each Disbursement this Period 552.11
	City: Pembroke Pines, State: FL, Zip Code: 33027-1154	
	Purpose of Disbursement: Salary Expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House, <input type="checkbox"/> Senate, <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary, <input type="checkbox"/> General, <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1221.57
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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Keith Fernandez Mailing Address 15982 SW 3rd Street City State Zip Code Pembroke Pines FL 33027-1154 Purpose of Disbursement Travel Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16063 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period 18.28
B.	Full Name (Last, First, Middle Initial) Mr. Keith Fernandez Mailing Address 15982 SW 3rd Street City State Zip Code Pembroke Pines FL 33027-1154 Purpose of Disbursement Salary Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-16075 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 552.11
C.	Full Name (Last, First, Middle Initial) Mr. Keith Fernandez Mailing Address 15982 SW 3rd Street City State Zip Code Pembroke Pines FL 33027-1154 Purpose of Disbursement Salary Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-15999 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 9	Amount of Each Disbursement this Period 552.11

SUBTOTAL of Disbursements This Page (optional) ▶	1122.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 109 / 112

<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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Ms. Olga Fleites

Transaction ID: B-E-16078
Date of Disbursement

Mailing Address 6703 N Kendall Drive
Apt. 406

/ /

City Miami State FL Zip Code 33156-1779

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Reimbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Mr. John S. Gamino

Transaction ID: B-E-16038
Date of Disbursement

Mailing Address 5240 Duke Street
Apt. 111

/ /

City Alexandria State VA Zip Code 22304-2952

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel Reimbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Juan Juig

Transaction ID: B-E-15957
Date of Disbursement

Mailing Address 1010 SW 62nd Avenue

/ /

City West Miami State FL Zip Code 33144-4908

Amount of Each Disbursement this Period

Purpose of Disbursement
Event Photography

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

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)

<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)
Ros-Lehtinen For Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Pedro Martin

Transaction ID: B-I-15782
Date of Disbursement

Mailing Address 900 Biscayne Boulevard

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	9

City State Zip Code
Miami FL 33132-1561

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Inkind: Valet Service

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Dr. David A. Rodriguez, M.D.

Transaction ID: B-I-15786
Date of Disbursement

Mailing Address 10900 Old Cutler Road

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	9

City State Zip Code
Coral Gables FL 33156-4234

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
Inkind: Caterer

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mrs. Deborah Herman Romano

Transaction ID: B-I-15778
Date of Disbursement

Mailing Address 3574 West Fairview Street
569

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	9

City State Zip Code
Miami FL 33133-4048

Amount of Each Disbursement this Period

218.46

Purpose of Disbursement
Inkind: Caterer

Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1118.46

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)

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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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Mr. Enrique Ros <hr/> Mailing Address 10201 SW 60th Place <hr/> City Pinecrest State FL Zip Code 33156-1914 <hr/> Purpose of Disbursement Photos Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15964 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>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">81.34</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	9	81.34	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	9		2	8		2	0	0	9															
81.34																								
001																								
B.	Full Name (Last, First, Middle Initial) Ileana Ros-Lehtinen <hr/> Mailing Address PO Box 522784 <hr/> City Miami State FL Zip Code 33152-2784 <hr/> Purpose of Disbursement Travel Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15592 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>0</td><td>7</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1337.34</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">002</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	6		2	0	0	9	1337.34	002
M	M	/	D	D	/	Y	Y	Y	Y															
0	7		0	6		2	0	0	9															
1337.34																								
002																								
C.	Full Name (Last, First, Middle Initial) Ileana Ros-Lehtinen <hr/> Mailing Address PO Box 522784 <hr/> City Miami State FL Zip Code 33152-2784 <hr/> Purpose of Disbursement Travel Reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-15956 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>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1669.55</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">002</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	9	1669.55	002
M	M	/	D	D	/	Y	Y	Y	Y															
0	8		1	5		2	0	0	9															
1669.55																								
002																								

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="font-size: 1.2em;">3088.23</td> </tr> </table>	3088.23
3088.23		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="height: 20px;"> </td> </tr> </table>	

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)
Ros-Lehtinen For Congress

A.	Full Name (Last, First, Middle Initial) Ileana Ros-Lehtinen Mailing Address PO Box 522784 City Miami State FL Zip Code 33152-2784 Purpose of Disbursement Travel Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-15848 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 2177.88 002 Category/ Type
B.	Full Name (Last, First, Middle Initial) Ileana Ros-Lehtinen Mailing Address PO Box 522784 City Miami State FL Zip Code 33152-2784 Purpose of Disbursement Travel Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-15998 Date of Disbursement 09 / 08 / 2009 Amount of Each Disbursement this Period 1806.43 002 Category/ Type
C.	Full Name (Last, First, Middle Initial) Mr. Roger Zimmerman Mailing Address 311 NW 19th Street City Homestead State FL Zip Code 33030-3112 Purpose of Disbursement Travel Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-15976 Date of Disbursement 07 / 24 / 2009 Amount of Each Disbursement this Period 1773.70 002 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5758.01

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

44546.33