

# 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  
Robert Wexler for Congress Committee

ADDRESS (number and street) Post Office Box 810669  
 Check if different than previously reported. (ACC)  
Boca Raton FL 33431

2. **FEC IDENTIFICATION NUMBER** C00307694  
**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
FL 19

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 04 01 2009 through 06 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 Beverly Robinson

Signature of Treasurer Electronically Filed by Beverly Robinson Date 07 12 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

2 / 85

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Robert Wexler for Congress Committee

Report Covering the Period:

From:

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

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 9

	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)).....	124195.38	222804.96
(b) Total Contribution Refunds (from Line 20(d)).....	2500.00	3500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	121695.38	219304.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	99146.07	336766.25
(b) Total Offsets to Operating Expenditures (from Line 14).....	111.06	2361.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	99035.01	334405.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1033488.33	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	8305.81	

**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  
Robert Wexler for Congress Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

<b>I. RECEIPTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	58350.00	111450.00
(i) Itemized (use Schedule A).....	19395.38	31904.96
(ii) Unitemized.....	77745.38	143354.96
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	46450.00	79450.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	124195.38	222804.96
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	111.06	2361.06
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	151.09	-228.48
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	124457.53	224937.54

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	99146.07	336766.25
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	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	3500.00
21. OTHER DISBURSEMENTS.....	16775.00	21224.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	118421.07	361490.25

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1027451.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	124457.53
25. SUBTOTAL (add Line 23 and Line 24).....	1151909.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	118421.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1033488.33

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 85  
(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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Adler</p> <p>Mailing Address 1400 NW 107th Ave Ste 500</p> <p>City State Zip Code Doral FL 33172-2746</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Adler Group, Inc Chairman CEO</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 5 / 1 4 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C16297</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">2400.00</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">4800.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Stan Altan</p> <p>Mailing Address 1917 Arlington Ave</p> <p>City State Zip Code North Brunswick NJ 08902-4154</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Johnson &amp; Johnson Statistician</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  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 5 / 0 7 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C16373</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Ricky Arriola</p> <p>Mailing Address 450 Alton Rd Apt 1007</p> <p>City State Zip Code Miami Beach FL 33139-6716</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Intel Direct Corp. President/CEO</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  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 6 / 1 2 / 2 0 0 9</span></p> <p><b>Transaction ID:</b> C16381</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3150.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; text-align: right;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 85</span>
	(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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Teal Baker		Date of Receipt MM / DD / YYYY 06 / 29 / 2009		
	Mailing Address 1301 M Street NW		<b>Transaction ID:</b> C16938		
	City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Podesta Group		Occupation Lobbyist		
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Brian Ballard		Date of Receipt MM / DD / YYYY 05 / 13 / 2009		
	Mailing Address 403 East Park Avenue		<b>Transaction ID:</b> C16275		
	City Tallahassee	State FL	Zip Code 32301	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Smith & Ballard		Occupation Government Relations		
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Bennett		Date of Receipt MM / DD / YYYY 05 / 27 / 2009		
	Mailing Address 8946 S College Place		<b>Transaction ID:</b> C16281		
	City Tulsa	State OK	Zip Code 74137	Amount of Each Receipt this Period 250.00	
	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 ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1250.00
<b>TOTAL</b> 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 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mitchell Berger

Mailing Address 7121 NW 65th Terrace

City State Zip Code  
Parkland FL 33067

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Berger Singerman Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

**Transaction ID:** C16402

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Brian Bilzin

Mailing Address 200 S Biscayne Boulevard

City State Zip Code  
Miami FL 33131

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Bilzin Sumberg Partner

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

**Transaction ID:** C16904

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Stephen Bittel

Mailing Address 801 Arthur Godfrey Rd

City State Zip Code  
Miami Beach FL 33140-3323

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Terranova Corporation Chairman

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 9

**Transaction ID:** C16299

Amount of Each Receipt this Period  
1200.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2200.00

**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: <span style="float: right;">PAGE 8 / 85</span> (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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Stephen Bittel</p> <p>Mailing Address 801 Arthur Godfrey Rd</p> <p>City State Zip Code Miami Beach FL 33140-3323</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Terranova Corporation Chairman</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 style="text-align: right; margin-right: 50px;">3600.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p><b>Transaction ID:</b> C16949</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">600.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	0	9	600.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	6		0	8		2	0	0	9																						
600.00																															

<p><b>B.</b> Full Name (Last, First, Middle Initial) Lea Black</p> <p>Mailing Address 832 S Greenway Dr</p> <p>City State Zip Code Coral Gables FL 33134-4832</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Peace Now, LLC Beauty Consultant</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 style="text-align: right; margin-right: 50px;">500.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p><b>Transaction ID:</b> C16407</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">500.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	0	9	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	6		0	3		2	0	0	9																						
500.00																															

<p><b>C.</b> Full Name (Last, First, Middle Initial) Don Bonker</p> <p>Mailing Address 4774 Old Dominion Drive</p> <p>City State Zip Code Arlington VA 22207</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation APCO Worldwide Executive Vice President</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 style="text-align: right; margin-right: 50px;">500.00</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <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>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p><b>Transaction ID:</b> C16919</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: center;"> <tr><td colspan="10">500.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	9	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	6		1	2		2	0	0	9																						
500.00																															

<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<table border="1" style="width: 100%;"> <tr><td colspan="10">1600.00</td></tr> </table>	1600.00									
1600.00											
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<table border="1" style="width: 100%; height: 20px;"> <tr><td colspan="10"></td></tr> </table>										



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Teresa Brady

Mailing Address 1735 Edgewood Avenue S

City State Zip Code  
Jacksonville FL 32205

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Airsman-Hires Office Manager

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 27 / 2009  
**Transaction ID: C16282**  
 Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Steve Brodie

Mailing Address 10260 SW 142nd Street

City State Zip Code  
Miami FL 33176

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Carlton Fields Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 10 / 2009  
**Transaction ID: C16892**  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 341 Farnham Q

City State Zip Code  
Deerfield Beach FL 33442

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 06 / 2009  
**Transaction ID: C16865**  
 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 10 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

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

Mailing Address 3103 Verdmont Ln

City Wellington State FL Zip Code 33414-3459

FEC ID number of contributing federal political committee. C

Name of Employer Robert Half IT Occupation Network Engineer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 01 / 2009  
**Transaction ID: C16424**  
 Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Robert Christes

Mailing Address 2732 NE 35th Dr

City Fort Lauderdale State FL Zip Code 33308-6316

FEC ID number of contributing federal political committee. C

Name of Employer Delta Air Lines Occupation Flight Attendant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 18 / 2009  
**Transaction ID: C16466**  
 Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Charles Clarkson

Mailing Address 3100 University Blvd S Ste 200

City Jacksonville State FL Zip Code 32216-2727

FEC ID number of contributing federal political committee. C

Name of Employer IxReveal, Inc. Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 06 / 10 / 2009  
**Transaction ID: C16473**  
 Amount of Each Receipt this Period 2400.00

**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: (check only one)	PAGE 11 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Devens		Date of Receipt
	Mailing Address 78 Maple St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Center Sandwich	NH	03227-3440
	FEC ID number of contributing federal political committee.		Transaction ID: C16313
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer retired		Occupation retired	<input type="text"/>
Receipt For: 2010		Election Cycle-to-Date ▼	100.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			
		<input type="text"/> 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Devens		Date of Receipt
	Mailing Address 78 Maple St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Center Sandwich	NH	03227-3440
	FEC ID number of contributing federal political committee.		Transaction ID: C16312
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer retired		Occupation retired	<input type="text"/>
Receipt For: 2010		Election Cycle-to-Date ▼	100.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			
		<input type="text"/> 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Devens		Date of Receipt
	Mailing Address 78 Maple St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Center Sandwich	NH	03227-3440
	FEC ID number of contributing federal political committee.		Transaction ID: C16310
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer retired		Occupation retired	<input type="text"/>
Receipt For: 2010		Election Cycle-to-Date ▼	100.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			
		<input type="text"/> 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/>	300.00
<b>TOTAL</b> 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 12 / 85  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Richard Devens

Mailing Address 78 Maple St

City State Zip Code  
Center Sandwich NH 03227-3440

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  
06 / 11 / 2009

Transaction ID: C16311

Amount of Each Receipt this Period  
100.00

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Diffenderfer

Mailing Address 506 27th Street

City State Zip Code  
West Palm Beach FL 33407

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

Name of Employer Occupation  
Lewis Longman & 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  
05 / 06 / 2009

Transaction ID: C16867

Amount of Each Receipt this Period  
1000.00

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Jason Eberstein

Mailing Address 13500 Flowerfield Dr

City State Zip Code  
Potomac MD 20854-6389

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

Name of Employer Occupation  
Strategic Public Affairs Government Relations

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 03 / 2009

Transaction ID: C16503

Amount of Each Receipt this Period  
500.00

500.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Joe Falk  
Mailing Address 1770 Micanopy Ave  
City Miami State FL Zip Code 33133-3323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Mortgage/Realestate  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 06 / 22 / 2009  
Transaction ID: C16514  
Amount of Each Receipt this Period 900.00

**B.** Full Name (Last, First, Middle Initial)  
Joe Falk  
Mailing Address 1770 Micanopy Ave  
City Miami State FL Zip Code 33133-3323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Mortgage/Realestate  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 06 / 22 / 2009  
Transaction ID: C16513  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Michiko Fukuda  
Mailing Address 2818 Passy Ave  
City San Diego State CA Zip Code 92122-3137  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Burnham Institute for Medical Rese Occupation scientist  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 400.00  
Date of Receipt 06 / 24 / 2009  
Transaction ID: C16322  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mary Garcia-benogochea

Mailing Address 4903 Morven Road

City State Zip Code  
Jacksonville FL 32210

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

Name of Employer Self Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 0 / 2 0 0 9

**Transaction ID:** C16907

Amount of Each Receipt this Period  
1500.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin Gay

Mailing Address 20 20th Avenue North

City State Zip Code  
Jax Beach FL 32250

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

Name of Employer Operation New Hope Occupation Director

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 5 / 2 7 / 2 0 0 9

**Transaction ID:** C16283

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Kim Glasgal

Mailing Address 11095 Riverport Drive W

City State Zip Code  
Jacksonville FL 32223

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

Name of Employer Jacksonville Jewish Center Occupation Teacher

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 5 / 2 7 / 2 0 0 9

**Transaction ID:** C16284

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 85
	<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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Tony Hill	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 4000 SW 47th Street	<b>Transaction ID:</b> C16285
	City State Zip Code Gainesville FL 32608	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Chestnut Firm Partner Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joe Martin Hilliard	Date of Receipt MM / DD / YYYY 05 / 13 / 2009
	Mailing Address 5500 Flaghole Road	<b>Transaction ID:</b> C16271
	City State Zip Code Clewiston FL 33440	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Hilliard Brothers Farmer Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Wayne Hogan	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 913 Sorrento Road	<b>Transaction ID:</b> C16288
	City State Zip Code Jacksonville FL 32207-3911	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF ATTORNEY Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> 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 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Henry Howard

Mailing Address 600 Brickell Avenue

City State Zip Code  
Key Biscayne FL 33149

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

Name of Employer Occupation  
US Education Finance Group President

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

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2009

**Transaction ID: C16887**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Matthew Kane

Mailing Address 400 E Bay Street

City State Zip Code  
Jacksonville FL 32202

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

Name of Employer Occupation  
Greenshades Software Software Developer

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

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2009

**Transaction ID: C16287**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Howard Korman

Mailing Address 6784 Lindord Lane

City State Zip Code  
Jacksonville FL 32217

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

Name of Employer Occupation  
JACKSONVILLE RACING PRESIDENT

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

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2009

**Transaction ID: C16294**

Amount of Each Receipt this Period  
2000.00

**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 18 / 85

(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)  
Robert Wexler for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Margery Kraus

Mailing Address 1040 Brook Valley Lane

City State Zip Code  
Mc Lean VA 22102

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

Name of Employer Occupation  
APCO Worldwide CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: C16926

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Norman Lent

Mailing Address 3529 Malvern Court

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Lent & Scrivner Executive

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 5 / 2 1 / 2 0 0 9

Transaction ID: C16875

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Alan Lieberman

Mailing Address 1680 Meridian Avenue

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Occupation  
Self Developer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 9

Transaction ID: C16923

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 85
	<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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara Lipman		Date of Receipt
	Mailing Address 3309 Devon Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2009
	City	State	Zip Code
	Miami	FL	33133
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: C16902</b>
Name of Employer Self		Occupation Homemaker	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"/> 2400.00
		<input type="text"/> 4800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Barbara Lipman		Date of Receipt
	Mailing Address 3309 Devon Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2009
	City	State	Zip Code
	Miami	FL	33133
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: C16901</b>
Name of Employer Self		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00
		<input type="text"/> 4800.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) David Lipman		Date of Receipt
	Mailing Address 3309 Devon Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2009
	City	State	Zip Code
	Miami	FL	33133
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: C16894</b>
Name of Employer Self		Occupation Attorney	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"/> 2400.00
		<input type="text"/> 4800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 7200.00
<b>TOTAL</b> 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 20 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
David Lipman  
 Mailing Address 3309 Devon Court  
 City Miami State FL Zip Code 33133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Attorney  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4800.00  
 Date of Receipt 06 / 10 / 2009  
**Transaction ID: C16893**  
 Amount of Each Receipt this Period 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Nathan Mandler  
 Mailing Address 12525 SW 69th Avenue  
 City Miami State FL Zip Code 33156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Berman Rennart Vogel Occupation Attorney  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
 Date of Receipt 06 / 10 / 2009  
**Transaction ID: C16896**  
 Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Joseph McCann  
 Mailing Address 5382 Pempridge Place  
 City Tallahassee State FL Zip Code 32309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Smith & Ballard Occupation Consultant  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
 Date of Receipt 05 / 13 / 2009  
**Transaction ID: C16272**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3150.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 21 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Stuart Miller

Mailing Address 700 NW 107th Avenue

City State Zip Code  
Miami FL 33172

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

Name of Employer Lennar Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

**Transaction ID: C16889**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas O'Connell

Mailing Address 7859 Emerald Winds Circle

City State Zip Code  
Boynton Beach FL 33473

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

Name of Employer Self Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

**Transaction ID: C16913**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Wayne Pathman

Mailing Address 72 South Hibiscus Drive

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Pathman Lewis Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 9

**Transaction ID: C16900**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 85  
(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)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Harold Patricoff, Jr.  
Mailing Address 6390 SW 114th Street  
City State Zip Code  
Pinecrest Postal S FL 33156  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Shutts & Bowen Partner  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2009  
Transaction ID: C16909  
Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Walter Postula  
Mailing Address 1915 Lakeside Drive  
City State Zip Code  
Orlando FL 32803  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00  
Date of Receipt  
M M / D D / Y Y Y Y  
06 / 12 / 2009  
Transaction ID: C16929  
Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Pucillo  
Mailing Address 224 Dunbar Road  
City State Zip Code  
Palm Beach FL 33480  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self Attorney  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt  
M M / D D / Y Y Y Y  
05 / 06 / 2009  
Transaction ID: C16872  
Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3150.00  
**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 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Armando Roche

Mailing Address 1906 Orient Road

City Tampa State FL Zip Code 33619

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

Name of Employer Roche Surety Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2009  
**Transaction ID: C16921**  
 Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Romano Romani

Mailing Address 11124 Arroyo Drive

City Rockville State MD Zip Code 20852

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

Name of Employer Self Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2009  
**Transaction ID: C16925**  
 Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Patrick Rooney

Mailing Address 1111 N Congress Avenue

City West Palm Beach State FL Zip Code 33409

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

Name of Employer ROONEY ENTERPRISES Occupation PRESIDENT

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 05 / 06 / 2009  
**Transaction ID: C16871**  
 Amount of Each Receipt this Period 2300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4300.00**

**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 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Marian Rose

Mailing Address 9 Old Corner Rd

City Bedford State NY Zip Code 10506-1611

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 ▼ 450.00

Date of Receipt 04 / 29 / 2009  
**Transaction ID: C16361**  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 450 Alton Road

City Miami Beach State FL Zip Code 33139

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

Name of Employer Greenberg Traurig Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 10 / 2009  
**Transaction ID: C16898**  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
William Shaheen

Mailing Address 2650 N Military Trl Ste 240

City Boca Raton State FL Zip Code 33431-6346

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

Name of Employer Berger Singerman, P.A. Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 06 / 08 / 2009  
**Transaction ID: C16766**  
 Amount of Each Receipt this Period 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

**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 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Slade

Mailing Address 10613 Gainesboro Road

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
Cormac Group Lobbyist

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2009

**Transaction ID:** C16906

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Neal Slafsky

Mailing Address 21884 Reflection Lane

City State Zip Code  
Boca Raton FL 33428

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

Name of Employer Occupation  
Capitol Planning Group President

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2009

**Transaction ID:** C16888

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Nancy Soderberg

Mailing Address 121 Lantern Wick Place

City State Zip Code  
Ponte Vedra Beach FL 32082

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

Name of Employer Occupation  
Self Author

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 27 / 2009

**Transaction ID:** C16291

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

**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 / 85
(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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert L. Stein		Date of Receipt MM / DD / YYYY 05 / 27 / 2009		
	Mailing Address 3903 Orgega Boulevard		<b>Transaction ID:</b> C16286		
	City Jacksonville	State FL	Zip Code 32210	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF	Occupation BUSINESS OWNER			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Suits		Date of Receipt MM / DD / YYYY 06 / 10 / 2009		
	Mailing Address 1446 Karlin Court		<b>Transaction ID:</b> C16797		
	City East Lansing	State MI	Zip Code 48823	Amount of Each Receipt this Period 250.00	
	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 ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Tein		Date of Receipt MM / DD / YYYY 06 / 10 / 2009		
	Mailing Address 11045 SW 69th Avenue Road		<b>Transaction ID:</b> C16899		
	City Pinecrest Postal S	State FL	Zip Code 33156	Amount of Each Receipt this Period 1800.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self	Occupation Attorney			
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1800.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3050.00
<b>TOTAL</b> 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 / 85  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Courtney Whitis

Mailing Address 3670 Mossy Creek Lane

City State Zip Code  
Tallahassee FL 32311

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

Name of Employer Self Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	0	9

**Transaction ID: C16270**

Amount of Each Receipt this Period  

1000.00
---------

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Yarowsky

Mailing Address 4200 Massachusetts Avenue NW

City State Zip Code  
Washington DC 20016

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

Name of Employer Patton Boggs LLP Occupation Partner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	7	/	2	0	0	9

**Transaction ID: C16279**

Amount of Each Receipt this Period  

1500.00
---------

**C.** Full Name (Last, First, Middle Initial)  
Evan J. Yegelwel

Mailing Address 2953 Mandarin Hollow Drive

City State Zip Code  
Jacksonville FL 32257

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	7	/	2	0	0	9

**Transaction ID: C16290**

Amount of Each Receipt this Period  

1000.00
---------

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

3500.00
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**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 28 / 85  
(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
							15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Morrie Zimmerman

Mailing Address 2800 Scott Mill Terrace

City State Zip Code  
Jacksonville FL 32257

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

Name of Employer Far East Brokers & Consultants  
Occupation Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 27 / 2009

Transaction ID: C16292

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	58350.00

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

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

FOR LINE NUMBER: PAGE 29 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
AAJ PAC

Mailing Address 1050 31st Street NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00024521

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 Y  
 0 6 / 1 2 / 2 0 0 9

**Transaction ID:** C16920

Amount of Each Receipt this Period  
 3000.00

**B.** Full Name (Last, First, Middle Initial)  
ALPA-PAC

Mailing Address Air Line Pilots Assoc. PAC  
1625 Massachusetts Avenue NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 9

**Transaction ID:** C16930

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

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 5 / 2 7 / 2 0 0 9

**Transaction ID:** C16276

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**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 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)  
Mailing Address 1120 Connecticut Avenue NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

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 6 / 1 0 / 2 0 0 9

**Transaction ID:** C16884

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
ASCAP LEGISLATIVE FUND FOR THE ARTS, THE  
Mailing Address One Lincoln Plaza

City State Zip Code  
New York NY 10023

FEC ID number of contributing federal political committee. **C** C00228296

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 2 / 2 0 0 9

**Transaction ID:** C16918

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
ASSOCIATION OF AMERICAN RAILROADS PAC  
Mailing Address 50 F Street N.W.

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 7 / 2 0 0 9

**Transaction ID:** C16278

Amount of Each Receipt this Period  
1000.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Association of Federal Government Employees PAC  
Mailing Address 80 F Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00009936

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 21 / 2009  
**Transaction ID: C16876**  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AT&T  
Mailing Address Political Action Committee  
32 Avenue of the Americas

City New York State NY Zip Code 10013

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 06 / 29 / 2009  
**Transaction ID: C16931**  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
BNSF RAILPAC  
Mailing Address Post Office Box 961039

City Fort Worth State TX Zip Code 76161

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 29 / 2009  
**Transaction ID: C16934**  
 Amount of Each Receipt this Period: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Boeing Politica I Action Committee

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 9

**Transaction ID:** C16935

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Citigroup Inc PAC

Mailing Address 1101 Pennsylvania Avenue NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00008474

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 Y  
 0 6 / 2 9 / 2 0 0 9

**Transaction ID:** C16932

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
COUNCIL FOR RESPONSIBLE NUTRITION POLITICAL ACTION COMMITTEE (AKA CRNPAC)

Mailing Address 1828 L STREET NW SUITE 900

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00399659

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 2 / 2 0 0 9

**Transaction ID:** C16917

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

**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 / 85  
(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)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
County & Municipal Employees, AFL-CIO  
Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
06 / 10 / 2009

Transaction ID: C16948

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Credit Suisse Securities PAC  
Mailing Address 1155 21st Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00111559

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
06 / 30 / 2009

Transaction ID: C16944

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
CSX CORPORATION GOOD GOVERNMENT FUND  
Mailing Address 1331 Pennsylvania Ave NW Ste 560 Suite 560

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY  
05 / 27 / 2009

Transaction ID: C16280

Amount of Each Receipt this Period: 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 85  
(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)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Deloitte Federal Political Action Committee

Mailing Address Post Office B ox 365

City State Zip Code  
Washington DC 20044-0365

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 2 / 2 0 0 9

**Transaction ID:** C16922

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
FAA Managers Association PAC

Mailing Address 315-4410 Massachusetts Avenue NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C** C00366070

Name of Employer Occupation

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 5 / 0 6 / 2 0 0 9

**Transaction ID:** C16869

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Florida Health

Mailing Address Political Action Committee  
P.O. Box 6936

City State Zip Code  
Jacksonville FL 32236-6936

FEC ID number of contributing federal political committee. **C** C00161141

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 7 / 2 0 0 9

**Transaction ID:** C16289

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
FOWLER WHITE BOGGS BANKER PA AND SUNCOAST FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 501 E KENNEDY BLVD SUITE 1700

City State Zip Code  
TAMPA FL 33602

FEC ID number of contributing federal political committee. **C** C00230516

Name of Employer Occupation

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 5 / 1 3 / 2 0 0 9

**Transaction ID:** C16274

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
HERBALIFE INTERNATIONAL INC. POLITICAL ACTION COMMITTEE (AKA HERBALIFEPAC)

Mailing Address 1800 CENTURY PARK EAST

City State Zip Code  
CENTURY CITY CA 90067

FEC ID number of contributing federal political committee. **C** C00393298

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 9

**Transaction ID:** C16937

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
International Brotherhood of Electrical

Mailing Address Workers Committee on Political Edu  
900 Seventh Street NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 7 / 2 0 0 9

**Transaction ID:** C16293

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
International Council of Shopping Centers Inc PAC  
Mailing Address 1399 New York Avenue

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 9

**Transaction ID:** C16946

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Lockheed Martin Empl  
Mailing Address 1725 Jefferson David Highway

City State Zip Code  
Arlington VA 22202

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 6 / 2 0 0 9

**Transaction ID:** C16870

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Machinists Non-Partisan Political League  
Mailing Address 9000 Machinist Place

City State Zip Code  
Upper Marlboro MD 20772

FEC ID number of contributing federal political committee. **C** C00002469

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 Y  
 0 6 / 3 0 / 2 0 0 9

**Transaction ID:** C16947

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

**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 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way  
Box 97017

City State Zip Code  
Redmond WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 9

**Transaction ID:** C16936

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
National Action Committee PAC

Mailing Address 3389 Sheridan Street

City State Zip Code  
Hollywood FL 33021

FEC ID number of contributing federal political committee. **C** C00147983

Name of Employer Occupation

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 6 / 1 0 / 2 0 0 9

**Transaction ID:** C16883

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
PROFESSIONAL BAIL AGENTS OF THE UNITED STATES PAC AKA PBUS PAC

Mailing Address 1301 PENNSYLVANIA AVE SUITE 925

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00416677

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 2 / 2 0 0 9

**Transaction ID:** C16924

Amount of Each Receipt this Period  
450.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1950.00

**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 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

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

Mailing Address 1100 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 9

**Transaction ID:** C16933

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
SSL Political Action Committee

Mailing Address 180 Maiden Lane

City State Zip Code  
New York NY 10038

FEC ID number of contributing federal political committee. **C** C00297184

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 0 / 2 0 0 9

**Transaction ID:** C16882

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
UAW V CAP

Mailing Address 8000 E. Jefferson

City State Zip Code  
Detroit MI 48214-3963

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 6 / 2 0 0 9

**Transaction ID:** C16868

Amount of Each Receipt this Period  
 1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 39 / 85  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Date of Receipt  

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

Mailing Address 600 13th St. NW  
Suite 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010470

Transaction ID: C16881

Amount of Each Receipt this Period  
3000.00

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
United States Sugar Corp.- Employee Stock Owner-

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	0	9

Mailing Address Ship Plan PAC  
P.O. Drawer 1207

City State Zip Code  
Clewiston FL 33440

FEC ID number of contributing federal political committee. **C** C00234120

Transaction ID: C16273

Amount of Each Receipt this Period  
1500.00

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	46450.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 85  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
JPMorgan Chase Bank

Mailing Address PO Box 260180

City State Zip Code  
Baton Rouge LA 70826

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 309.56

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

**Transaction ID: C16269**

Amount of Each Receipt this Period  
49.87

**B.** Full Name (Last, First, Middle Initial)  
JPMorgan Chase Bank

Mailing Address PO Box 260180

City State Zip Code  
Baton Rouge LA 70826

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 309.56

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 9

**Transaction ID: C16916**

Amount of Each Receipt this Period  
47.69

**C.** Full Name (Last, First, Middle Initial)  
JPMorgan Chase Bank

Mailing Address PO Box 260180

City State Zip Code  
Baton Rouge LA 70826

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 309.56

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

**Transaction ID: C16943**

Amount of Each Receipt this Period  
52.65

**SUBTOTAL** of Receipts This Page (optional) ..... ► **150.21**

**TOTAL** This Period (last page this line number only) ..... ► **150.21**



# 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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniella Acosta Mailing Address 3403 Barton Road City Pompano Beach State FL Zip Code 33061 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:	<b>Transaction ID:</b> D7299 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period 707.74
<b>B.</b>	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 530001 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Transaction Fees 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:	<b>Transaction ID:</b> D7202 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 555.88
<b>C.</b>	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 530001 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Transaction Fees 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:	<b>Transaction ID:</b> D7280 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period 5.95

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1269.57
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 85

<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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) American Express  Mailing Address P.O. Box 530001  City Atlanta State GA Zip Code 30353  Purpose of Disbursement Transaction Fees 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: D7292 Date of Disbursement 06 / 05 / 2009  Amount of Each Disbursement this Period 142.92  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address P.O. BOX 24679  City WEST PALM BEACH State FL Zip Code 33416-4679  Purpose of Disbursement Wireless Service 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: D7182 Date of Disbursement 04 / 07 / 2009  Amount of Each Disbursement this Period 32.95  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T  Mailing Address P.O. BOX 24679  City WEST PALM BEACH State FL Zip Code 33416-4679  Purpose of Disbursement Wireless Service 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: D7227 Date of Disbursement 04 / 13 / 2009  Amount of Each Disbursement this Period 59.09  001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**234.96**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> D7226
	Mailing Address P.O. BOX 24679	Date of Disbursement MM / DD / YYYY 04 / 13 / 2009
	City WEST PALM BEACH State FL Zip Code 33416-4679	Amount of Each Disbursement this Period 207.40
	Purpose of Disbursement Wireless 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) ▼	001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> D7193
	Mailing Address P.O. BOX 24679	Date of Disbursement MM / DD / YYYY 04 / 23 / 2009
	City WEST PALM BEACH State FL Zip Code 33416-4679	Amount of Each Disbursement this Period 159.94
	Purpose of Disbursement Wireless 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) ▼	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> D7234
	Mailing Address P.O. BOX 24679	Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	City WEST PALM BEACH State FL Zip Code 33416-4679	Amount of Each Disbursement this Period 21.82
	Purpose of Disbursement Wireless 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) ▼	001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

389.16

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> D7238
	Mailing Address P.O. BOX 24679	Date of Disbursement MM / DD / YYYY 05 / 04 / 2009
	City WEST PALM BEACH State FL Zip Code 33416-4679	Amount of Each Disbursement this Period 32.95
	Purpose of Disbursement Wireless 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) ▼	001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> D7259
	Mailing Address P.O. BOX 24679	Date of Disbursement MM / DD / YYYY 05 / 14 / 2009
	City WEST PALM BEACH State FL Zip Code 33416-4679	Amount of Each Disbursement this Period 159.14
	Purpose of Disbursement Wireless 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) ▼	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) AT&T	<b>Transaction ID:</b> D7294
	Mailing Address P.O. BOX 24679	Date of Disbursement MM / DD / YYYY 06 / 02 / 2009
	City WEST PALM BEACH State FL Zip Code 33416-4679	Amount of Each Disbursement this Period 32.95
	Purpose of Disbursement Wireless 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) ▼	001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

225.04

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D7334 Date of Disbursement 06 / 08 / 2009
	Mailing Address P.O. BOX 24679	Amount of Each Disbursement this Period 203.04
	City WEST PALM BEACH State FL Zip Code 33416-4679	
	Purpose of Disbursement Wireless Service 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) AT&T	Transaction ID: D7325 Date of Disbursement 06 / 14 / 2009
	Mailing Address P.O. BOX 24679	Amount of Each Disbursement this Period 160.30
	City WEST PALM BEACH State FL Zip Code 33416-4679	
	Purpose of Disbursement Wireless Service 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) Berger Singerman	Transaction ID: D7261 Date of Disbursement 05 / 25 / 2009
	Mailing Address 350 East Las Olas Boulevard	Amount of Each Disbursement this Period 2225.00
	City Fort Lauderdale State FL Zip Code 33301	
	Purpose of Disbursement Legal Consultation 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) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**2588.34**

**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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) BOCA RATON FLORIST  Mailing Address 14301 N.FEDERAL HIGHWAY  City BOCA RATON State FL Zip Code 33432  Purpose of Disbursement Floral Arrangements 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: D7329 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 9  Amount of Each Disbursement this Period 316.15  Category/ Type 007
<b>B.</b>	Full Name (Last, First, Middle Initial) Theresa Brier  Mailing Address 12242 NW 57th Street  City Coral Springs State FL Zip Code 33076  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: D7239 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9  Amount of Each Disbursement this Period 45.06  Category/ Type 002
<b>C.</b>	Full Name (Last, First, Middle Initial) Car 54 Messenger Service  Mailing Address 2200 NE 2nd Street  City Boynton Beach State FL Zip Code 33435  Purpose of Disbursement Messenger Service 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: D7237 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9  Amount of Each Disbursement this Period 40.00  Category/ Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	401.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Car 54 Messenger Service</p> <p>Mailing Address 2200 NE 2nd Street</p> <p>City Boynton Beach State FL Zip Code 33435</p> <p>Purpose of Disbursement Messenger Service</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><b>Transaction ID:</b> D7245</p> <p>Date of Disbursement 05 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 92.00</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Car 54 Messenger Service</p> <p>Mailing Address 2200 NE 2nd Street</p> <p>City Boynton Beach State FL Zip Code 33435</p> <p>Purpose of Disbursement Messenger Service</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><b>Transaction ID:</b> D7263</p> <p>Date of Disbursement 06 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Comcast</p> <p>Mailing Address 1915 Harrison Street</p> <p>City Hollywood State FL Zip Code 33020</p> <p>Purpose of Disbursement Wireless Service</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><b>Transaction ID:</b> D7190</p> <p>Date of Disbursement 04 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 48.20</p> <p>001 Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

190.20

**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)  
Robert Wexler for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Comcast <hr/> Mailing Address 1915 Harrison Street <hr/> City Hollywood State FL Zip Code 33020 <hr/> Purpose of Disbursement Wireless Service 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) ▼	<b>Transaction ID:</b> D7285 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 47.95
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Comcast <hr/> Mailing Address 1915 Harrison Street <hr/> City Hollywood State FL Zip Code 33020 <hr/> Purpose of Disbursement Wireless Service 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) ▼	<b>Transaction ID:</b> D7267 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 42.13
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Comcast <hr/> Mailing Address 1915 Harrison Street <hr/> City Hollywood State FL Zip Code 33020 <hr/> Purpose of Disbursement Wireless Service 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) ▼	<b>Transaction ID:</b> D7296 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 47.95
	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) ..... ▶

138.03

**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)  
Robert Wexler for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Comcast <hr/> Mailing Address 1915 Harrison Street <hr/> City Hollywood State FL Zip Code 33020 <hr/> Purpose of Disbursement Wireless Service 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) ▼	<b>Transaction ID:</b> D7310 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 42.84
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Dalsimer Floral Decorators <hr/> Mailing Address Federal Highway <hr/> City Boca Raton State FL Zip Code 33431 <hr/> Purpose of Disbursement Floral Arrangements 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) ▼	<b>Transaction ID:</b> D7229 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 286.20
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Dalsimer Floral Decorators <hr/> Mailing Address Federal Highway <hr/> City Boca Raton State FL Zip Code 33431 <hr/> Purpose of Disbursement Floral Arrangements 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) ▼	<b>Transaction ID:</b> D7246 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 72.09
	Category/ Type 007
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	401.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dalsimer Floral Decorators  Mailing Address Federal Highway  City Boca Raton State FL Zip Code 33431  Purpose of Disbursement Floral Arrangements 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: D7316 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>6</td><td></td><td>1</td><td>2</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;">312.11</td> </tr> </table> Category/Type: 007	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	9	312.11
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	2		2	0	0	9														
312.11																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Florida Department of Revenue  Mailing Address Carlton Building  City Tallahassee State FL Zip Code 32399  Purpose of Disbursement Tax Payment 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: D7332 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>6</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;">1736.00</td> </tr> </table> Category/Type: 001	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	9	1736.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	0		2	0	0	9														
1736.00																							
<b>C.</b>	Full Name (Last, First, Middle Initial) Impact Politics  Mailing Address 273 East Forest Oak Circle  City Davie State FL Zip Code 33325  Purpose of Disbursement Media Consulting 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: D7192 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>4</td><td></td><td>2</td><td>3</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;">1000.00</td> </tr> </table> Category/Type: 004	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	3		2	0	0	9														
1000.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td style="text-align: center;">3048.11</td> </tr> </table>	3048.11
3048.11		
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Impact Politics Mailing Address 273 East Forest Oak Circle City Davie State FL Zip Code 33325 Purpose of Disbursement Media Consulting 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: D7197 Date of Disbursement 05 / 04 / 2009 Amount of Each Disbursement this Period 1000.00 004 Category/ Type
B.	Full Name (Last, First, Middle Initial) Impact Politics Mailing Address 273 East Forest Oak Circle City Davie State FL Zip Code 33325 Purpose of Disbursement Media Consulting 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: D7297 Date of Disbursement 06 / 02 / 2009 Amount of Each Disbursement this Period 1935.00 004 Category/ Type
C.	Full Name (Last, First, Middle Initial) JIM HOSKINS Mailing Address P.O. BOX 7115 City WEST PALM BEACH State FL Zip Code 33405 Purpose of Disbursement Accounting Services 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: D7254 Date of Disbursement 05 / 29 / 2009 Amount of Each Disbursement this Period 2200.00 001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5135.00
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Eric Johnson Mailing Address 4408 Windom Place NW City Washington State DC Zip Code 20007 Purpose of Disbursement Fundraising & Strategy Consulting 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:	<b>Transaction ID:</b> D7185 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9	Amount of Each Disbursement this Period 4000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Johnson Mailing Address 4408 Windom Place NW City Washington State DC Zip Code 20007 Purpose of Disbursement Fundraising & Strategy Consulting 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:	<b>Transaction ID:</b> D7196 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period 4000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Johnson Mailing Address 4408 Windom Place NW City Washington State DC Zip Code 20007 Purpose of Disbursement Fundraising & Strategy Consulting 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:	<b>Transaction ID:</b> D7283 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9000.00
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Eric Johnson Mailing Address 4408 Windom Place NW City Washington State DC Zip Code 20007 Purpose of Disbursement Fundraising & Strategy Consulting 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:	<b>Transaction ID:</b> D7284 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Johnson Mailing Address 4408 Windom Place NW City Washington State DC Zip Code 20007 Purpose of Disbursement Fundraising & Strategy Consulting 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:	<b>Transaction ID:</b> D7300 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Johnson Mailing Address 4408 Windom Place NW City Washington State DC Zip Code 20007 Purpose of Disbursement Fundraising & Strategy Consulting 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:	<b>Transaction ID:</b> D7323 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3000.00

**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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Eric Johnson  Mailing Address 4408 Windom Place NW  City Washington State DC Zip Code 20007  Purpose of Disbursement Fundraising & Strategy Consulting 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: D7322 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 9  Amount of Each Disbursement this Period 3000.00  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Theodore Johnston  Mailing Address 2000 North Street NW  City Washington State DC Zip Code 20036  Purpose of Disbursement Fundraising Consulting 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: D7131 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9  Amount of Each Disbursement this Period 6000.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Theodore Johnston  Mailing Address 2000 North Street NW  City Washington State DC Zip Code 20036  Purpose of Disbursement Fundraising Consulting 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: D7287 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9  Amount of Each Disbursement this Period 6000.00  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Mariana Calvacca

Mailing Address 8155 Mystic Harbor Circle

City State Zip Code  
Boynton Beach FL 33436

Purpose of Disbursement  
Mailing Service  
Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: D7250  
Date of Disbursement

05 / 24 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)  
McDermott Will & Emory

Mailing Address 600 13th Street NW

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Legal Consultation  
Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: D7186  
Date of Disbursement

04 / 04 / 2009

Amount of Each Disbursement this Period

1822.45

C.

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy Street

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
Catering  
Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: D7253  
Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

480.00

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

2552.45

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) National Democratic Club  Mailing Address 30 Ivy Street  City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Catering 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) ▼	<b>Transaction ID:</b> D7317 Date of Disbursement 06 / 12 / 2009  Amount of Each Disbursement this Period 523.20	007 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) NGP Software  Mailing Address 5440 Nevada Avenue NW  City Washington State DC Zip Code 20013 Purpose of Disbursement Computer Consulting 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) ▼	<b>Transaction ID:</b> D7321 Date of Disbursement 06 / 12 / 2009  Amount of Each Disbursement this Period 5697.00	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Nossaman Llp  Mailing Address 1666 K Street NW  City Washington State DC Zip Code 20006 Purpose of Disbursement Legal Consultation 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) ▼	<b>Transaction ID:</b> D7187 Date of Disbursement 04 / 04 / 2009  Amount of Each Disbursement this Period 806.25	001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7026.45

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Postmaster Mailing Address 604 Banyan Trail City Boca Raton State FL Zip Code 33431 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) ▼	<b>Transaction ID:</b> D7320 Date of Disbursement 06 / 12 / 2009 Amount of Each Disbursement this Period 250.00 001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Prime Pay Mid-Atlantic Inc. Mailing Address 140 Conference Center Drive City Chantilly State VA Zip Code 20151 Purpose of Disbursement Payroll Services 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) ▼	<b>Transaction ID:</b> D7204 Date of Disbursement 04 / 13 / 2009 Amount of Each Disbursement this Period 193.45 001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Prime Pay Mid-Atlantic Inc. Mailing Address 140 Conference Center Drive City Chantilly State VA Zip Code 20151 Purpose of Disbursement Payroll - Johnson/Rogin/Acosta 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) ▼	<b>Transaction ID:</b> D7205 Date of Disbursement 04 / 14 / 2009 Amount of Each Disbursement this Period 5080.03 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5523.48

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Prime Pay Mid-Atlantic Inc.	Transaction ID: D7206 Date of Disbursement
	Mailing Address 140 Conference Center Drive	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll - Johnson/Rogin/Acosta	<input type="text" value="4306.00"/>
	Candidate Name	<input type="text" value="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) Prime Pay Mid-Atlantic Inc.	Transaction ID: D7281 Date of Disbursement
	Mailing Address 140 Conference Center Drive	<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Services	<input type="text" value="129.85"/>
	Candidate Name	<input type="text" value="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) Prime Pay Mid-Atlantic Inc.	Transaction ID: D7282 Date of Disbursement
	Mailing Address 140 Conference Center Drive	<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Chantilly State VA Zip Code 20151	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll - Johnson/Rogin/Acosta	<input type="text" value="4735.80"/>
	Candidate Name	<input type="text" value="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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9171.65"/>
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Prime Pay Mid-Atlantic Inc. <hr/> Mailing Address 140 Conference Center Drive <hr/> City Chantilly State VA Zip Code 20151 <hr/> Purpose of Disbursement Payroll - Johnson/Rogin/Acosta 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: D7289 Date of Disbursement 06 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 1095.26
<b>B.</b>	Full Name (Last, First, Middle Initial) Prime Pay Mid-Atlantic Inc. <hr/> Mailing Address 140 Conference Center Drive <hr/> City Chantilly State VA Zip Code 20151 <hr/> Purpose of Disbursement Payroll Services 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: D7290 Date of Disbursement 06 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 129.85
<b>C.</b>	Full Name (Last, First, Middle Initial) Prime Pay Mid-Atlantic Inc. <hr/> Mailing Address 140 Conference Center Drive <hr/> City Chantilly State VA Zip Code 20151 <hr/> Purpose of Disbursement Payroll - Johnson/Rogin/Acosta 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: D7291 Date of Disbursement 06 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 3973.27

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**5198.38**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Josh Rogin <hr/> Mailing Address 1539 Roxanna Road NW <hr/> City Washington State DC Zip Code 20012 <hr/> Purpose of Disbursement Media Consulting Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/Type <hr/> 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>Transaction ID:</b> D7189 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">04</div> / <div style="border: 1px solid black; padding: 2px;">23</div> / <div style="border: 1px solid black; padding: 2px;">2009</div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">500.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) Josh Rogin <hr/> Mailing Address 1539 Roxanna Road NW <hr/> City Washington State DC Zip Code 20012 <hr/> Purpose of Disbursement Media Consulting Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/Type <hr/> 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>Transaction ID:</b> D7255 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">05</div> / <div style="border: 1px solid black; padding: 2px;">13</div> / <div style="border: 1px solid black; padding: 2px;">2009</div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) Josh Rogin <hr/> Mailing Address 1539 Roxanna Road NW <hr/> City Washington State DC Zip Code 20012 <hr/> Purpose of Disbursement Media Consulting Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div> Category/Type <hr/> 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>Transaction ID:</b> D7298 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">06</div> / <div style="border: 1px solid black; padding: 2px;">02</div> / <div style="border: 1px solid black; padding: 2px;">2009</div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">250.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 2px;">1750.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 2px; height: 20px;"></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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: D7203 Date of Disbursement 04 / 10 / 2009
	Mailing Address BOX 405100	Amount of Each Disbursement this Period 224.31
	City FT. LAUDERDALE State FL Zip Code 33340-5100	
	Purpose of Disbursement Transaction Fees 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) Suntrust Bank	Transaction ID: D7217 Date of Disbursement 04 / 27 / 2009
	Mailing Address BOX 405100	Amount of Each Disbursement this Period 15.00
	City FT. LAUDERDALE State FL Zip Code 33340-5100	
	Purpose of Disbursement Maintenance Fee 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) Suntrust Bank	Transaction ID: D7279 Date of Disbursement 05 / 11 / 2009
	Mailing Address BOX 405100	Amount of Each Disbursement this Period 135.89
	City FT. LAUDERDALE State FL Zip Code 33340-5100	
	Purpose of Disbursement Transaction Fees 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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>375.20</b>
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Suntrust Bank Mailing Address BOX 405100 City FT. LAUDERDALE State FL Zip Code 33340-5100 Purpose of Disbursement Maintenance 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: D7278 Date of Disbursement 05 / 29 / 2009 Amount of Each Disbursement this Period 15.00 001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Suntrust Bank Mailing Address BOX 405100 City FT. LAUDERDALE State FL Zip Code 33340-5100 Purpose of Disbursement Transaction Fees 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: D7293 Date of Disbursement 06 / 10 / 2009 Amount of Each Disbursement this Period 434.53 001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Suntrust Bank Mailing Address BOX 405100 City FT. LAUDERDALE State FL Zip Code 33340-5100 Purpose of Disbursement Maintenance 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: D7288 Date of Disbursement 06 / 30 / 2009 Amount of Each Disbursement this Period 15.00 001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>464.53</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Hamilton Campaigns</p> <p>Mailing Address 4201 Connecticut Avenue NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Research Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D7188 <b>Date of Disbursement</b> 04 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The River Club</p> <p>Mailing Address 1 Independent Drive</p> <p>City Jacksonville State FL Zip Code 32202</p> <p>Purpose of Disbursement Catering Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D7252 <b>Date of Disbursement</b> 05 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1155.60</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Union Printing</p> <p>Mailing Address 2321 Pembroke Road</p> <p>City Deerfield Beach State FL Zip Code 33441</p> <p>Purpose of Disbursement Printing Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D7248 <b>Date of Disbursement</b> 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 983.07</p> <p>006 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4638.67

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Union Printing <hr/> Mailing Address 2321 Pembroke Road <hr/> City State Zip Code Deerfield Beach FL 33441 <hr/> Purpose of Disbursement Printing <hr/> Candidate Name <hr/> 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: D7251 Date of Disbursement 05 / 27 / 2009 <hr/> Amount of Each Disbursement this Period 906.30
B.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 25768 <hr/> City State Zip Code Boca Raton FL 33439 <hr/> Purpose of Disbursement Wireless Service <hr/> Candidate Name <hr/> 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: D7183 Date of Disbursement 04 / 07 / 2009 <hr/> Amount of Each Disbursement this Period 663.04
C.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 25768 <hr/> City State Zip Code Boca Raton FL 33439 <hr/> Purpose of Disbursement Wireless Service <hr/> Candidate Name <hr/> 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: D7225 Date of Disbursement 04 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 142.95

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1712.29

**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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D7191 Date of Disbursement 04 / 23 / 2009
	Mailing Address PO Box 25768	Amount of Each Disbursement this Period 47.35
	City Boca Raton State FL Zip Code 33439	
	Purpose of Disbursement Wireless Service 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) Verizon Wireless	Transaction ID: D7194 Date of Disbursement 04 / 28 / 2009
	Mailing Address PO Box 25768	Amount of Each Disbursement this Period 288.04
	City Boca Raton State FL Zip Code 33439	
	Purpose of Disbursement Wireless Service 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) Verizon Wireless	Transaction ID: D7235 Date of Disbursement 04 / 30 / 2009
	Mailing Address PO Box 25768	Amount of Each Disbursement this Period 120.86
	City Boca Raton State FL Zip Code 33439	
	Purpose of Disbursement Wireless Service 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) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

456.25

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address PO Box 25768  City Boca Raton State FL Zip Code 33439  Purpose of Disbursement Wireless 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: D7236 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>4</td><td></td><td>3</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: right;">288.04</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	9	288.04
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		3	0		2	0	0	9														
288.04																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address PO Box 25768  City Boca Raton State FL Zip Code 33439  Purpose of Disbursement Wireless 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: D7260 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>5</td><td></td><td>1</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: right;">662.85</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	9	662.85
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	4		2	0	0	9														
662.85																							
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address PO Box 25768  City Boca Raton State FL Zip Code 33439  Purpose of Disbursement Wireless 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: D7268 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>5</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 <table border="1"> <tr> <td style="text-align: right;">46.25</td> </tr> </table> 001 Category/ Type	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	9	46.25
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	5		2	0	0	9														
46.25																							

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

997.14

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 85

<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)  
Robert Wexler for Congress Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25768</p> <p>City Boca Raton State FL Zip Code 33439</p> <p>Purpose of Disbursement Wireless Service</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><b>Transaction ID:</b> D7295</p> <p>Date of Disbursement 06 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 662.85</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25768</p> <p>City Boca Raton State FL Zip Code 33439</p> <p>Purpose of Disbursement Wireless Service</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><b>Transaction ID:</b> D7311</p> <p>Date of Disbursement 06 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 41.20</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25768</p> <p>City Boca Raton State FL Zip Code 33439</p> <p>Purpose of Disbursement Wireless Service</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><b>Transaction ID:</b> D7328</p> <p>Date of Disbursement 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 248.69</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

952.74

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25768 City Boca Raton State FL Zip Code 33439 Purpose of Disbursement Wireless Service - Voided Check 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:	<b>Transaction ID:</b> D7337 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period -320.31
<b>B.</b>	Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address Military Trail City Boca Raton State FL Zip Code 33431 Purpose of Disbursement Service Charge 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:	<b>Transaction ID:</b> D7224 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 9	Amount of Each Disbursement this Period 3.98
<b>C.</b>	Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address Military Trail City Boca Raton State FL Zip Code 33431 Purpose of Disbursement Taxes 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:	<b>Transaction ID:</b> D7333 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 5484.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5167.67

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Robert Wexler for Congress Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Guat Juac</p> <p>Mailing Address 1200 North Nash</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Transportation 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><b>Transaction ID:</b> D7199 <b>Date of Disbursement</b> 05 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Pillars Hotel</p> <p>Mailing Address 111 North Birch Road</p> <p>City Fort Lauderdale State FL Zip Code 33304</p> <p>Purpose of Disbursement Lodging 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><b>Transaction ID:</b> D7201 <b>Date of Disbursement</b> 05 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 263.24</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address Post Office Box 36647</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Airline Tickets 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><b>Transaction ID:</b> D7200 <b>Date of Disbursement</b> 05 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 250.40</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 530001 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Travel Expenses 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: D7207 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9 Amount of Each Disbursement this Period 594.18 Category/Type 002
B.	Full Name (Last, First, Middle Initial) The Apple Computer Store Mailing Address 4829 Bethesda Avenue City Bethesda State MD Zip Code 20814 Purpose of Disbursement Computer Equipment & 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: D7208 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9 Amount of Each Disbursement this Period 571.23 Category/Type 001 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address Post Office Box 15153 City Wilmington State DE Zip Code 19850 Purpose of Disbursement Travel Expenses 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: D7209 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 9 Amount of Each Disbursement this Period 3323.15 Category/Type 002

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**3917.33**

**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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Art And Soul Restaurant</p> <p>Mailing Address 415 New Jersey Avenue NW</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Catering</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><b>Transaction ID:</b> D7214</p> <p>Date of Disbursement 04 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 581.92</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Federal Express/Kinkos</p> <p>Mailing Address Post Office Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Postage</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><b>Transaction ID:</b> D7213</p> <p>Date of Disbursement 04 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 64.07</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address Post Office Box 36647</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Airline Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7210</p> <p>Date of Disbursement 04 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 436.29</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Catering 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: D7216 Date of Disbursement 04 / 27 / 2009 Amount of Each Disbursement this Period 1059.86 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) U.S. Airways Mailing Address P.O. Box 1501 City Winston-Salem State NC Zip Code 27102 Purpose of Disbursement Airline Tickets 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: D7211 Date of Disbursement 04 / 27 / 2009 Amount of Each Disbursement this Period 864.60 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 530001 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Travel Expenses 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: D7220 Date of Disbursement 06 / 17 / 2009 Amount of Each Disbursement this Period 1602.14

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1602.14

**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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address Post Office Box 619612</p> <p>City Dallas State TX Zip Code 75261</p> <p>Purpose of Disbursement Airline Tickets</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><b>Transaction ID:</b> D7221 <b>Date of Disbursement</b> 06 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 546.70</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fontainebleau Hotel</p> <p>Mailing Address 4401 Collins Avenue</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Lodging</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><b>Transaction ID:</b> D7222 <b>Date of Disbursement</b> 06 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 325.44</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Guat Juac</p> <p>Mailing Address 1200 North Nash</p> <p>City Arlington State VA Zip Code 22209</p> <p>Purpose of Disbursement Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7223 <b>Date of Disbursement</b> 06 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 730.00</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Mastercard Mailing Address PO Box 14050 City Las Vegas State NV Zip Code 89114 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: D7232 Date of Disbursement 04 / 30 / 2009 Amount of Each Disbursement this Period 481.33 001 Category/Type
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Drive City Framingham State MA Zip Code 01702 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: D7233 Date of Disbursement 04 / 30 / 2009 Amount of Each Disbursement this Period 481.33 001 Category/Type [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 530001 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Travel Expenses 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: D7257 Date of Disbursement 05 / 14 / 2009 Amount of Each Disbursement this Period 121.99 002 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	603.32
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address Post Office Box 15153</p> <p>City Wilmington State DE Zip Code 19850</p> <p>Purpose of Disbursement Travel Expenses</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><b>Transaction ID:</b> D7269</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 2663.76</p> <p>002 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Federal Express/Kinkos</p> <p>Mailing Address Post Office Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Postage</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><b>Transaction ID:</b> D7275</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 38.83</p> <p>001 Category/Type</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Grill Time</p> <p>Mailing Address 8177 Glades Road</p> <p>City Boca Raton State FL Zip Code 33431</p> <p>Purpose of Disbursement Catering</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><b>Transaction ID:</b> D7271</p> <p>Date of Disbursement 05 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 453.77</p> <p>002 Category/Type</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2663.76

**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)  
Robert Wexler for Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Postmaster Mailing Address 604 Banyan Trail City Boca Raton State FL Zip Code 33431 Purpose of Disbursement Postage 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:	<b>Transaction ID:</b> D7277 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 18.30 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) U.S. Airways Mailing Address P.O. Box 1501 City Winston-Salem State NC Zip Code 27102 Purpose of Disbursement Airline Tickets 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:	<b>Transaction ID:</b> D7270 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 1855.20 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 25768 City Boca Raton State FL Zip Code 33439 Purpose of Disbursement Wireless Service 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:	<b>Transaction ID:</b> D7272 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 23.64 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 530001</p> <p>City Atlanta State GA Zip Code 30353</p> <p>Purpose of Disbursement Travel Expenses</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><b>Transaction ID:</b> D7312</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="661.31"/></p> <p>Category/Type: <input type="text" value="002"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 530001</p> <p>City Atlanta State GA Zip Code 30353</p> <p>Purpose of Disbursement Membership 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><b>Transaction ID:</b> D7313</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="150.00"/></p> <p>Category/Type: <input type="text" value="001"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fontainebleau Hotel</p> <p>Mailing Address 4401 Collins Avenue</p> <p>City Miami Beach State FL Zip Code 33140</p> <p>Purpose of Disbursement Lodging</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><b>Transaction ID:</b> D7315</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="241.93"/></p> <p>Category/Type: <input type="text" value="002"/></p> <p><b>[MEMO ITEM]</b></p>

**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)  
Robert Wexler for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Chase Card Services

Transaction ID: D7326  
Date of Disbursement

Mailing Address Post Office Box 15153

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	0	9

City Wilmington State DE Zip Code 19850

Amount of Each Disbursement this Period

Purpose of Disbursement  
Travel Expenses

002
Category/ Type

1964.89
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
American Airlines

Transaction ID: D7305  
Date of Disbursement

Mailing Address Post Office Box 619612

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	0	9

City Dallas State TX Zip Code 75261

Amount of Each Disbursement this Period

Purpose of Disbursement  
Airline Tickets

002
Category/ Type

169.60
--------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Federal Express/Kinkos

Transaction ID: D7307  
Date of Disbursement

Mailing Address Post Office Box 1140

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	0	9

City Memphis State TN Zip Code 38101-1140

Amount of Each Disbursement this Period

Purpose of Disbursement  
Postage

001
Category/ Type

235.15
--------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

[MEMO ITEM]

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

1964.89
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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)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Mk Catering, Inc	Transaction ID: D7309 Date of Disbursement 06 / 14 / 2009
	Mailing Address 5724 Lafayette Place	Amount of Each Disbursement this Period 395.20
	City Hyattsville State MD Zip Code 20781	
	Purpose of Disbursement Catering Candidate Name	007 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) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: D7306 Date of Disbursement 06 / 14 / 2009
	Mailing Address 604 Banyan Trail	Amount of Each Disbursement this Period 308.00
	City Boca Raton State FL Zip Code 33431	
	Purpose of Disbursement Postage 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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: D7302 Date of Disbursement 06 / 14 / 2009
	Mailing Address Post Office Box 36647	Amount of Each Disbursement this Period 362.75
	City Dallas State TX Zip Code 75235	
	Purpose of Disbursement Airline Tickets Candidate Name	002 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) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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)  
Robert Wexler for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Tortilla Coast

Mailing Address 400 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Catering

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D7308

Date of Disbursement

06 / 14 / 2009

Amount of Each Disbursement this Period

87.44

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
U.S. Airways

Mailing Address P.O. Box 1501

City Winston-Salem State NC Zip Code 27102

Purpose of Disbursement  
Airline Tickets

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D7304

Date of Disbursement

06 / 14 / 2009

Amount of Each Disbursement this Period

104.60

[MEMO ITEM]

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

0.00

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

98353.82

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

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Stanford Financial Group Co Employees' PAC

Transaction ID: D7195

Date of Disbursement

Mailing Address 1399 New York Avenue NW

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	9

City State Zip Code  
Washington DC 20005

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Contribution Refund

010
Category/ Type

Candidate Name  
Stanford Financial Group Co Employees' PAC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2500.00
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**TOTAL** This Period (last page this line number only) ..... ►

2500.00
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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 type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

A.	Full Name (Last, First, Middle Initial) Aging & Disability Resource Center  Mailing Address 5345 NW 35th Avenue  City Fort Lauderdale State FL Zip Code 33309  Purpose of Disbursement Event Ticket 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: D7230 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9  Amount of Each Disbursement this Period 25.00  Category/Type 012
B.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee  Mailing Address 430 SOUTH CAPITOL STREET  City WASHINGTON State DC Zip Code 20003  Purpose of Disbursement Dues/Excess Funds Candidate Name Democratic Congressional Campaign Committee  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: D7324 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 9  Amount of Each Disbursement this Period 15000.00  Category/Type 011
C.	Full Name (Last, First, Middle Initial) FLORIDA DEMOCRATIC PARTY  Mailing Address 214 South Bronough Street  City Tallahassee State FL Zip Code 32302  Purpose of Disbursement Contribution Candidate Name FLORIDA DEMOCRATIC PARTY  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: D7240 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 9  Amount of Each Disbursement this Period 1750.00  Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>16775.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>16775.00</b>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Erikson & Company	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 216 7th Street SE	
City Washington State DC ZIP Code 20003	

Outstanding Balance Beginning This Period 1787.89	<b>Transaction ID:</b> D2343	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1787.89

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe Slade	Nature of Debt (Purpose): Television Media Consult
Mailing Address 130 West 88th Street	
City New York State NY ZIP Code 10024	

Outstanding Balance Beginning This Period 196.25	<b>Transaction ID:</b> D2344	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 196.25

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Rhona Kirsner	Nature of Debt (Purpose): Financial Consulting
Mailing Address 5868 Hamilton Way	
City Boca Raton State FL ZIP Code 33496	

Outstanding Balance Beginning This Period 1500.00	<b>Transaction ID:</b> D2346	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	3484.14
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Robert Wexler for Congress Committee

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Ridder/Branden			Nature of Debt (Purpose): Ballot Information
Mailing Address Union Station, Suite 239			
City Denver	State CO	ZIP Code 80202	

Outstanding Balance Beginning This Period 2148.67		<b>Transaction ID: D2345</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2148.67	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Ted Den Dooven			Nature of Debt (Purpose): Computer Consulting
Mailing Address 2307 Linton Ridge Circle A			
City Delray Beach	State FL	ZIP Code 33444	

Outstanding Balance Beginning This Period 1673.00		<b>Transaction ID: D2347</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1673.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Tony Baudimann			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 1222 SE 1st Avenue			
City Fort Lauderdale	State FL	ZIP Code 33316	

Outstanding Balance Beginning This Period 1000.00		<b>Transaction ID: D2348</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	4821.67
<b>2) TOTALS</b> This Period (last page this line number only).....	8305.81
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	8305.81