

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

FLORIDA FREEDOM FUND PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11105.28"/>	<input type="text" value="11105.28"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="11105.28"/>	<input type="text" value="11105.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5463.30"/>	<input type="text" value="5463.30"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5641.98"/>	<input type="text" value="5641.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

FLORIDA FREEDOM FUND PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	2000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2000.00	2000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2000.00	2000.00
12. Transfers From Affiliated/Other Party Committees.....	9105.28	9105.28
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	11105.28	11105.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	11105.28	11105.28

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	63.30	63.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	63.30	63.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5400.00	5400.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5463.30	5463.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5463.30	5463.30

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2000.00	2000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2000.00	2000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	63.30	63.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	63.30	63.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
FLORIDA FREEDOM FUND PAC

A. SCHONBRUN, CHERIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2921 W TAMBAY AVE

City TAMPA	State FL	Zip Code 33611
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) FUNDRAISER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2022

Transaction ID : SA11A1.4115

Amount of Each Receipt this Period
2000.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.4100]

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1986.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2022

Transaction ID : SA11A1.4100

Amount of Each Receipt this Period
1986.70

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT: PAC
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FLORIDA FREEDOM FUND PAC

A. COOL MASTER PRO, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 ANDERSON RD

City TAMPA	State FL	Zip Code 33634
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2022

Transaction ID : SA12.4119

Amount of Each Receipt this Period
5000.00

Memo Item
 JFC TRANSFER: LLVF [SA12.4117]: PERMISSIBLE FUNDS: SEE ATTRIBUTION

B. LAUREL LEE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2743

City BRANDON	State FL	Zip Code 33509
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FEC ID number of contributing federal political committee. **C** C00826230

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9105.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2022

Transaction ID : SA12.4117

Amount of Each Receipt this Period
9105.28

Memo Item
 JFC TRANSFER: SEE ATTRIBUTIONS

C. MENG, XIANBIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8101 ANDERSON RD

City TAMPA	State FL	Zip Code 33634
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
 COOL MASTER PRO, LLC OWNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2022

Transaction ID : SA12.4124

Amount of Each Receipt this Period
5000.00

Memo Item
 COOL MASTER PRO, LLC:PERMISSIBLE FUNDS

SUBTOTAL of Receipts This Page (optional).....	9105.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
FLORIDA FREEDOM FUND PAC

A. SCHONBRUN, CHERIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2921 W TAMBAY AVE
 City TAMPA State FL Zip Code 33611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FUNDRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 10 / 26 / 2022
Transaction ID : SA12.4120
 Amount of Each Receipt this Period 2500.00
 Memo Item
 JFC TRANSFER: LLVF [SA12.4117]

B. SCHONBRUN, HARVEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2921 W TAMBAY AVE
 City TAMPA State FL Zip Code 33611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 26 / 2022
Transaction ID : SA12.4122
 Amount of Each Receipt this Period 2500.00
 Memo Item
 JFC TRANSFER: LLVF [SA12.4117]

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	9105.28

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
FLORIDA FREEDOM FUND PAC

Full Name (Last, First, Middle Initial)
A. BRUCE POLIQUIN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2022

Mailing Address PO BOX 524

FEC Identification Number

C C00788968

Transaction ID : SB23.4111

Amount of Each Disbursement this Period

2500.00

Memo Item

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
FEDERAL CONTRIBUTION

Category/Type

Candidate Name
POLIQUIN, BRUCE, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: ME District: 02

Full Name (Last, First, Middle Initial)
B. KIGGANS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2022

Mailing Address P.O. BOX 5042

FEC Identification Number

C C00776120

Transaction ID : SB23.4109

Amount of Each Disbursement this Period

2900.00

Memo Item

City VIRGINIA BEACH State VA Zip Code 23471

Purpose of Disbursement
FEDERAL CONTRIBUTION

Category/Type

Candidate Name
KIGGANS, JENNIFER, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: VA District: 02

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

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

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

5400.00

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

5400.00