PAGE 1 / 78

Image# 201607159020551636

**FEC** FORM 3Y

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

TORIW 3X	For Other Than An Aut	norized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, ty over the lines.	pe 12FE4M5
Florida Freedom PAC			
ADDRESS (number and street)	8330 Biscayne Blvd., Ste. 1		
Check if different			
than previously reported. (ACC)	Miami		FL 33138
2. FEC IDENTIFICATION N	UMBER ▼ CI	ГУ▲	STATE ▲ ZIP CODE ▲
C C00521013		S THIS X NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 2	0 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12)
(a) Quarterly Reports:		` ' 📙	(Non-Election Year Only)
April 15 Quarterly Report (0	21)	20 (M4) Jul 20	
July 15 Quarterly Report (0)	(c) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	/E) Election		in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 04	M / D D / Y Y Y Y 4 4 01 2016	through	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the	nis Report and to the best of	my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasure	er Gihan Perera		
Signature of Treasurer Giha	n Perera	[Electronically Filed	Date 07 15 / 2016
NOTE: Submission of false, erron	eous, or incomplete informatio	n may subject the person si	gning this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Florida Freedom PAC 04 2016 06 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 174632.75 January 1, 2016 (b) Cash on Hand at 156100.80 Beginning of Reporting Period..... 75000.00 75000.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 249632.75 231100.80 6(a) and 6(c) for Column B)..... 10833.84 29365.79 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 220266.96 220266.96 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 84905.61 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

			_
		Freedom	$D \wedge C$
_	inrina	$-r\Delta\Delta\alpha\alpha\alpha$	$P\Delta I$

Report Covering the Period: From: 04	01 2016	To: 06 30 2016
I. Receipts	COLUMN A	COLUMN B Calendar Year-to-Date
	Total This Period	Calendar fear-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	75000.00	75000.00
(1) 1101111200 (000 001100010 71)		
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	75000.00	75000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	75000.00	75000.00
Totals to Line 33, page 5)	73000.00	.3000.00
2. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
5. 7th Edulo 110001700		
1 Loop Popolyments Received	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	7	
(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
(b) Levin Funds (from Schedule H5	8(b))	) 8(b)) 0.00
(-1)		75000.0
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	75000.00	75000.00

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	40022.04	20205.76
Expenditures(c) Total Operating Expenditures	10833.84	29365.79
(add 21(a)(i), (a)(ii), and (b))▶	10833.84	29365.79
. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
i i		0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
Than I ontical committees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
		0.00
Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(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
2.1100 00(a)(i), 00(a)(ii) and 00(b))	7	7
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10833.84	29365.79
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	10833.84	29365.79

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	75000.00	75000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75000.00	75000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	10833.84	29365.79
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	10833.84	29365.79

## : 97 `A = G7 9 @ @ 5 B9 CIG`H9 LH`F9 @ 5 H98 `HC`5 `F9 DC FHž G7 < 98 I @ 9 `C F` ± H9 A ± N5 H± CB

Form/Schedule: F3XN Transaction ID:

The independent expenditures disclosed on Schedule E, Line 24, of this report were all originally paid by the committee's connected organization, New Florida Majority (NFM), with the intent that the committee would reimburse NFM for that activity. Thus, the committee disclosed a debt owed to NFM for these expenditures on Schedule D. Line 10. Further, because the 48-hour notices filed on 4/23 and 5/6 used estimated costs, some of the costs and a few of the vendors disclosed on this report will vary from what was disclosed on the 48-hour notices, because the committee is now disclosing the actual amounts spent. When the committee filed its 48-hr notices, it did so by estimating the weekly cost of canvassing activity, and using those totals to determine when 48-hr reporting was triggered. The committee used the first date of each of those weeks to determine the dissemination date. However, the committee paid its canvassers bi-weekly, so the payments disclosed here reflect two weeks? worth of canvassing activity, using the earliest date of that activity as the dissemination date. According to the estimate methodology used for 48-hour reporting, all 48-hour reports were filed timely. In addition, please note that currently the committee's software vendor, NGP VAN (which is FEC approved), requires the use of both the obligation/payment and dissemination date fields on Form 24 and Schedule E, even if a payment has not been made for the expenditure at the time the 24/48-hour notice or quarterly report is filed. On the 48-hour notices that were filed on 4/23 and 5/6, the committee used both the obligation date and dissemination date to disclose all estimated costs, and on this report, the committee has kept the dissemination date the same, but, changed the obligation date field to reflect the date the canvassers were paid by the connected organization.

Form/Schedule: Transaction ID:

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

FOR LINE NUMBER: **PAGE** 7 OF 78 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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 PAC Full Name (Last, First, Middle Initial) Civic Participation Action Fund Date of Receipt Mailing Address 1615 L Street NW 04 04 2016 City Zip Code State Transaction ID: C6663633 DC Washington 20036 Amount of Each Receipt this Period FEC ID number of contributing C 75000.00 federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 75000.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 75000.00 SUBTOTAL of Receipts This Page (optional)..... 75000.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	FOR LINE		E NUMBER: PAGE 8 OF 78	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b	
Any information conicd from such December 2015	conto mou set les celet en			
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	point			
Florida Freedom PAC				
Full Name (Last, First, Middle Initial)				
A. Compdealings			Date of Disbursement	
Mailing Address 2040 NE 462 Street Ste 240			04 14 2016	
Mailing Address 2040 NE 163 Street, Ste. 210			04 14 2016	
City	State Zip Code		Transaction ID D455074	
Miami	FL 33162		Transaction ID: D455074	
Purpose of Disbursement T-Shirts, Non-IE Related				
Candidate Name			Amount of Each Disbursement this Period	
Сапинате нате		Category/	850.34	
Office Sought: House Disbursen	nent For:	Туре	□ Managhani	
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:	· · · · · · · · · · · · · · · · · · ·			
Full Name (Last, First, Middle Initial)				
3. Evans & Katz LLC			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address PO Box 75357			05 04 2016	
•	State Zip Code		Transaction ID : D455076	
Washington Purpose of Disbursement	DC 20013-0357			
Compliance Services			Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	1218.50	
Office Sought: House Disbursen	nent For:		Memo Item	
	Primary General		_	
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. Evans & Katz LLC				
Mailing Address PO Box 75357			06 02 2016	
,	State Zip Code		Transaction ID : D455078	
· · · · · · · · · · · · · · · · · · ·	DC 20013-0357			
Purpose of Disbursement Compliance Services		· · ·		
Candidate Name			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	580.00	
Office Sought: House Disbursen	nent For:	Турс	Mama Itam	
Senate	Primary General		Memo Item	
President	Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		·····•	2648.84	
TOTAL This Period (last page this line number only)				
ILLIAL THIS PERIOD (19ST DOOD THIS line himber only)				

SCHEDULE B (FEC Form 3X)	FOR L		R LINE NUMBER: PAGE 9 OF 78	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	X 21b	22 23 24 25 26 28a 28b 28c 29 30b	
Any information copied from such Reports and Staten	nents may not be sold or us			
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)		· · · · · · · · · · · · · · · · · · ·		
Florida Freedom PAC				
Full Name (Last, First, Middle Initial)				
A. Evans & Katz LLC			Date of Disbursement	
Mailing Address PO Box 75357			04 07 2016	
•	State Zip Code		Transaction ID : D455073	
Washington	DC 20013-0357		Transaction D. D-533073	
Purpose of Disbursement Compliance Services		F	Amount of Each Disbursement this Period	
Candidate Name		Category/	80.00	
000		Туре	80.00	
Office Sought: House Disbursen Senate	nent For:  Primary General		Memo Item	
	Other (specify)			
State: District:	<b>₹1</b> - <b>3</b> / <b>₹</b>			
Full Name (Last, First, Middle Initial)				
<sup>3.</sup> Harmon,Curran,Spielberg & Eisenb	perg LLP		Date of Disbursement	
Mailing Address 1726 M Street NW, Suite 600			06 16 2016	
Mailing Address 1726 M Street NW, Suite 600			00 10 2010	
,	State Zip Code DC 20036-4523		Transaction ID : D455080	
Washington Purpose of Disbursement	DC 20036-4523			
Legal Services			Amount of Each Disbursement this Period	
Candidate Name		Category/	1972.00	
Office Sought: House Disbursen	nent For:	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
Harmon, Curran, Spielberg & Eisent	perg LLP			
Mailing Address 1726 M Street NW, Suite 600			05 18 2016	
City	State Zip Code		Transaction ID : D455077	
Washington Purpose of Disbursement	DC 20036-4523		Hallsaction ID . D4330//	
Legal Services			Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	3959.00	
Office Sought: House Disbursen			Memo Item	
Senate   President	Primary General Other (specify) ▼		_	
State: District:	onioi (opoony) ▼			
SUBTOTAL of Disbursements This Page (optional)			6011.00	
TOTAL This Period (last nage this line number only)				
ILLIAI THIS PERIOD (1981 HADE THIS line HUMBER ONLY)		▶	The second secon	

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only X 21b 27		
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 PAC				
Full Name (Last, First, Middle Initial)  A. Harmon, Curran, Spielberg & Eisenb  Mailing Address 1726 M Street NW, Suite 600	perg LLP		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
,	State Zip Code DC 20036-4523		Transaction ID : D455075	
Washington Purpose of Disbursement Legal Services Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
State: President District:	nent For: Primary General Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)  3. NGP VAN  Mailing Address 1101 15th Street NW Suite 500			Date of Disbursement  M M M / D D / Y D Y D Y D Y D Y D D Y D D Y D D D D	
,	State Zip Code DC 20005		Transaction ID : D455079  Amount of Each Disbursement this Period	
		Category/ Type	225.00 Memo Item	
Full Name (Last, First, Middle Initial)  Mailing Address			Date of Disbursement	
	State Zip Code			
		Category/	Amount of Each Disbursement this Period	
	nent For: Primary General Other (specify) ▼		Memo Item	
SUBTOTAL of Disbursements This Page (optional)		············· <b>&gt;</b>	2159.00	
TOTAL This Period (last page this line number only).		····· <b>&gt;</b>	10818.84	

# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

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

FOR LINE NUMBER: (check only one)

PAGE

	9
X	10

OF

78

NAME OF COMMITTEE (In Full) Florida Freedom PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Office Overhead Costs New Florida Majority Mailing Address 8330 Biscayne Blvd. Suite 1 City State Zip Code Miami 33138 Transaction ID: D366098 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 84905.61 84905.61 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 84905.61 1) SUBTOTALS This Period This Page (optional)..... 84905.61 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... 84905.61 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

# S

Gihan Perera

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 12 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	Torida Freedom PAC		C C00521013
Ch	neck if 24-hour report 48-hour report New report	Amends report	t filed on
	Full Name of Payee Macky Designs	⊠ Memo Ite	M M / D D / Y Y Y
	Mailing Address 10646 SW 76th Ter		04 13 2016 Amount
	City State Zip	Code	98.51
		173-2969	Transaction ID : D450162  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Campaign T-Shirts Design Serv., Disc. on 4/23 48- hr Report	ategory/ Type 004	04 02 / Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	X Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: Primary X General 2016 Other (specify) ▶
	Full Name of Payee	🗙 Memo Iten	Date of Public Distribution/Dissemination
	Staples  Mailing Address		04 13 / 2016
	Mailing Address 18591 S Dixie Hwy		Amount
	City State Zip	Code	122.19
		157-6845	Transaction ID : D450163  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Supplies for 4/13-5/15, Discl on 4/23 48-hr Report	ategory/ Type 004	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	86278.90	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
	(c) TOTAL Independent Expenditures		<b>•</b>
	Under penalty of perjury I certify that the independent expenditures repowith, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		

[Electronically Filed]

2016

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	CHEDULE E (FEC Form 3X)		
ΓΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 13 OF 78 FOR LINE 24 OF FORM 3X
NΑ	AME OF COMMITTEE (In Full)		
	Florida Freedom PAC		C C00521013
_ Ch	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on M = M / D = D / Y = Y = Y
	Full Name of Payee		em Date of Public Distribution/Dissemination
	Macky Designs		04 13 2016
	Mailing Address 10646 SW 76th Ter		Amount
	City State	Zip Code	98.51
	Miami FL	33173-2969	Transaction ID : D455066  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Campaign T-Shirts Design Serv., Disc. on 4/23 48- hr Report	Category/ Type 004	04 / 11 / 2016
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	X Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
	Full Name of Payee Office Depot	🗷 Memo lte	Date of Public Distribution/Dissemination  04 / 13 / 2016
	Mailing Address 6600 North Military Trail		Amount
	City State	Zip Code	25.77
	Boca Raton FL	33487	Transaction ID : D450165  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Supplies for 4/13-5/15, Discl on 4/23 48-hr Report	Category/ Type 004	04 / 13 / 2016
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	X Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Gihan Perera		M M / D D / Y Y Y

[Electronically Filed]

2016

15

07

## S IT

Gihan Perera

Signature

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 14 OF 78
JAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X
Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼
	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Full Name of Payee Memo Item Date of New Florida Majority	Public Distribution/Dissemination
, , , , , , , , , , , , , , , , , , ,	04 13 2016
Mailing Address 8330 Biscayne Blvd. Amount	t
Suite 1	
City State Zip Code Miami FL 33138 Transaci	1250.00
Date of	tion ID : D450720 f Disbursement or Obligation
D ( T ) ( D ) ( O ) D (//O E//E O O O O O O O O O O O O O O O O	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP Oppose Presider	nt Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016  Oth	For: Primary X General ner (specify) ►
Full Name of Payee	f Public Distribution/Dissemination
	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9191 W Flagler St Amoun	للننبا لنا لــــ
City State Zip Code	13.48
Wildini 12 00 11 2 100	tion ID : D450167  f Disbursement or Obligation
D : ( 0 !! ( 1/10 = //= D! ! 1/00   Oatogoly/	04 14 2016
Name of Federal Candidate Support Office Sought:	: House District:
DONALD J TRUMP	nt Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016 Ott	For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in co with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	•

[Electronically Filed]

2016

15

07

Gihan Perera

Signature

SCHEDULE E (FEC Form 3X)					
TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 15 OF FOR LINE 24 OF	
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NU	JMBER ▼
Florida Freedom PAC				C C00521013	
Check if 24-hour report 48-hour report	New repo	rt Amends repo	rt filed on	M / D D / Y D	Y Y Y
Full Name of Payee Compdealings		⊠ Memo Ito	Bate of	Public Distribution/Disser	
					2016
Mailing Address 2040 NE 163 Street, Ste. 210			Amoun		
City	State	Zip Code		4	125.17
Miami	FL	33162		ion ID : D450161 Disbursement or Obligati	on
Purpose of Expenditure Payment for Campaign T-Shirts, Disc. on 4/23 48-h	nr Report	Category/ Type 004			2016
Name of Federal Candidate		Support	Office Sought:	House Distric	t:
DONALD J TRUMP		X Oppose	X Presider	senate State	e:
Calendar Year-To-Date Per Election for Office Sought	7 7	36278.90	Disbursement 2016 Oth	For: Primary ×	General
Full Name of Payee		🔀 Memo Ite	m Date of	Public Distribution/Disser	mination
Juanita Alvarez					2016
Mailing Address 905 SW 1st Street Apt. 508			Amoun	i	
City	State	Zip Code	-	4	143.50
Miami	FL	33130		tion ID: D450073 Disbursement or Obligat	ion
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on Report	4/23 48-hr	Category/ Type 004		04 / 29 / Y	2016
Name of Federal Candidate		Support	Office Sought:	House Distric	t:
DONALD J TRUMP		Oppose	X Presider	nt Senate State	ə:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement 2016		General
	, , ,		Oth	ner (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditu	ures		•	7 1 7 1	0.00
(b) SUBTOTAL of Uniternized Independent Expendent	ditures				
				4	-78-1
(c) TOTAL Independent Expenditures			•	4	4
Under penalty of perjury I certify that the indepen- with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized				
, , ,, panty commission in					

[Electronically Filed]

2016

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## SCHEDULE E (FEC Form 3X)

CHEDOLE L (FLC FOIII 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 16 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	
	C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
	Public Distribution/Dissemination
Martina Bryant	
Mailing Address 6821 NW 6 Ave Amount	
City State Zip Code	475.50
	on ID: D450074 Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-Hr Report  Category/ Type 004	M / D D / Y Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP    Dopose   President	Senate State:
Calendar Year-To-Date Disbursement Fo	or: Primary X General
Per Election for Office Sought 36278.90 2016	er (specify)
Full Name of Payee     X   Memo Item   Date of F	Public Distribution/Dissemination
Zulema Camacho	
Mailing Address	
Mailing Address 100 SW 83 Way Apt. 102 Amount	
City State Zip Code	300.00
1 611151616 1 11166	on ID: D450078 Disbursement or Obligation
Purpose of Expenditure	M / D D / Y Y Y Y
Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  O4  O4	29 2016
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP  Oppose  President	Senate State:
Calendar Year-To-Date Disbursement F	For: Primary X General
Per Election for Office Sought 36278.90 2016	er (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	4 1 4 1
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coop with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

	CHEDULE E (FEC FORM 3X)	
lt	EMIZED INDEPENDENT EXPENDITURES	PAGE 17 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC	C C00521013
_ Ch	heck if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	Full Name of Payee  Judith Cruz	ate of Public Distribution/Dissemination
	Mailing Address 8181 NW S River Drive Apt. 145	04 / 13 / 2016
	And I NAM 2 KIVEL DILIVE Apr. 143	nount
	City State Zip Code	479.75
	Da	nsaction ID : D450080 ate of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type  004	04 29 / 2016
	Name of Federal Candidate Support Office Sou	ought: House District:
	DONALD J TRUMP  Oppose  Pres	
	Calendar Year-To-Date Per Election for Office Sought  Disbursen 2016	ment For:
	Miladis Diaz	ate of Public Distribution/Dissemination
		mount
	Apt 102	507.25
	Thalean 1 200 to 5200	597.25 nsaction ID : D450081
	Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	ate of Disbursement or Obligation  M 04 / 29 / 2016
	Name of Federal Candidate Support Office Sol	ought: House District:
	DONALD J TRUMP  DONALD J TRUMP  DONALD J TRUMP	
	Calendar Year-To-Date Per Election for Office Sought  Disbursen 2016	ment For:
	(a) SUBTOTAL of Itemized Independent Expenditures	0.00
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
	Gihan Perera [Electronically Filed] Date 07	15 2016
	O'mode Date	

## SCHEDULE E (FEC Form 3X)

SCHEDOLL L (FEC FOIII 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 18 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	
Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼
	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
	ate of Public Distribution/Dissemination
Pedro Gonzalez	04 13 2016
Mailing Address 915 NW 1st Ave	nount
Apt H2512	lount
City State Zip Code	465.00
	nsaction ID: D450083 ate of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	04 29 2016
Name of Federal Candidate Support Office Sou	ught: House District:
DONALD LTBUMD	sident Senate State:
Calendar Year-To-Date Disbursen	ment For: Primary X General
Per Election for Office Sought 36278.90 2016	Other (specify)
	ate of Public Distribution/Dissemination
Jose Miguel Gonzalez Ortiz	M M / D D / Y Y Y Y
Mailing Address 4224 NW 42 Street Poor	04 13 2016
1.37 LINVV 47 SHEEL REAL	nount
City State Zip Code	300.00
1411a111	nsaction ID : D450086 ate of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/26 48-hr Report  Category/ Type 004	04 / 29 / 2016
Name of Federal Candidate Support Office So	ought: House District:
DONALD J TRUMP	
Calendar Year-To-Date  Per Election for Office Sought  36278.90  Disbursen 2016	ment For: Primary X General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	·
Gihan Perera  [Electronically Filed] Date 07	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

Public Distribution/Dissemination  Public Distribution/Dissemination  Public Distribution/Dissemination  Public Distribution/Dissemination  Public Distribution  Public Distribution  Public Distribution/Dissemination  Public Di		PAGE 19 OF 78
Public Distribution/Dissemination  Public Distribut		FOR LINE 24 OF FORM 3X
Public Distribution/Dissemination  Public Distribut	EC II	
Public Distribution/Dissemination  A	С	
t  471.75  tion ID: D450088 Disbursement or Obligation  House District:  The Senate State:  For: Primary General Mark (specify)  For: Primary 2016  The Public Distribution/Dissemination  The Senate State:  524.00  The Senate State:  524.00  The Senate State:	М	/ D = D / Y = Y = Y
t  471.75  tion ID: D450088 Disbursement or Obligation  House District:  The Senate State:  For: Primary General Mark (specify)  Fublic Distribution/Dissemination  The Senate State:  For: D450089 Disbursement or Obligation  The Senate State:  Senate State:  Senate State:  Senate State:  The Senate	Publi	c Distribution/Dissemination
tion ID: D450088 f Disbursement or Obligation  House District:  The Senate State:  For: Primary General mer (specify)  f Public Distribution/Dissemination  out 13 2016  t 524.00  Stion ID: D450089 f Disbursement or Obligation  out 29 2016  House District:  Senate State:  The Senate State:  Senate State:  The Senate State:  The Senate State:  The Senate State:  The Senate State:		
tion ID: D450088 f Disbursement or Obligation  D4	t	
For: Primary Y 2016  House District:  The senate State:  For: Primary General Market (specify)    f Public Distribution/Dissemination  The senate State:  f Public Distribution/Dissemination  The senate State:  The senate State:  Senate State:  The senate State:  The senate State:  For: Primary General	,	471.75
House District:  The Senate State:  For: Primary General Marker (specify)    f Public Distribution/Dissemination  Senate State:  For: Primary General		
Senate State:  For: Primary General mer (specify) ▶  f Public Distribution/Dissemination  104		
For: Primary General  ner (specify)   f Public Distribution/Dissemination  out 13 2016  t 524.00  tion ID: D450089  f Disbursement or Obligation  out 29 2016  House District:  nt Senate State:  For: Primary General		House District:
f Public Distribution/Dissemination  f Public Distribution  f Public Distribution  f Public Distribution  f Public Distrib	nt	Senate State:
f Public Distribution/Dissemination  104		
tt  524.00  Ition ID: D450089  If Disbursement or Obligation  4 29 2016  House District:  The Senate State:  For: Primary General	ner (sp	pecify) ▶
t  524.00  tion ID: D450089 f Disbursement or Obligation  04  29  House District:  The Senate State:  For: Primary General		
tion ID: D450089 f Disbursement or Obligation 04		
tion ID: D450089  f Disbursement or Obligation  04	t	
tion ID: D450089  f Disbursement or Obligation  04	-	524.00
29 2016  House District:  nt Senate State:  For: Primary General		D : D450089
nt Senate State:  For: Primary General	- IVI	29 / 2016
For: Primary General	: [	House District:
For: Primary General	nt [	Senate State:
ner (specify)	For:	Primary X General
	ner (s	pecify) ▶
		0.00

	COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER	▼
Florida	a Freedom PAC				C C00521013	
Check if	24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed	on	
	ame of Payee		🔀 Memo It	em	Date of Public Distribution/Dissemination	
	n Henriquez				04 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y
Mailin	g Address 3351 SW 24 Terrace				Amount	
City		State	Zip Code		471.75	П
Miami		FL	33145		Transaction ID : D450088	-1
	se of Expenditure nent for Canvassing Serv. 4/13-4/27, rt	Disc. on 4/23 48-hr	Category/ Type 004		Date of Disbursement or Obligation  M	Y
Name	of Federal Candidate		Support	Office	e Sought: House District:	
DON	ALD J TRUMP		Oppose		President Senate State:	_
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbu 2016	ursement For: Primary X Genera  Other (specify) ▶	al
Full N	lame of Payee		X Memo Ite	m	Date of Public Distribution/Dissemination	$\equiv$
	mberto Iglesias				04 13 2016	
Mailin	g Address 8181 NW South River D	rive Apt. A14			Amount	1
						$\neg$
City		State	Zip Code		524.00	_
Medl		FL	33166		Transaction ID : D450089  Date of Disbursement or Obligation	
	ose of Expenditure nent for Canvassing Serv. 4/13-4/27, ort	Disc. on 4/23 48-hr	Category/ Type 004		04 29 / 2016	Y
Name	of Federal Candidate		Support	Office	e Sought: House District:	
DON	ALD J TRUMP		Oppose	X	President Senate State:	_
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbu 2016	ursement For: Primary X General S Other (specify) ►	al
(a) SU	BTOTAL of Itemized Independent E	xpenditures		. •	0.00	
(b) SU	BTOTAL of Unitemized Independen	t Expenditures		. •		
(c) TO	TAL Independent Expenditures					
with, or		ny candidate or authorized			ade in cooperation, consultation, or concer rr, or (if the reporting entity is not a politica	
	Gihan Perera	[Electroni	ically Filed] Date	M 07	7 15 2016	
Sigr	nature	<del>-</del>				

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	CHEDULE E (FEC Form 3X)	
Π	EMIZED INDEPENDENT EXPENDITURES	PAGE 20 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC	C C00521013
Cł	heck if 24-hour report 48-hour report New report Amends report filed on	n M = M / D = D / Y = Y = Y
	Full Name of Payee X Memo Item Viky Lara	Date of Public Distribution/Dissemination
	Mailing Address 11960 Tuttle Blvd.	04 13 / 2016
	Troot rulie Biva.	Amount
	City State Zip Code	391.50
		ransaction ID : D450093 Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	04 / 29 / 2016
	Name of Federal Candidate Support Office S	Sought: House District:
	DONALD J TRUMP Oppose P	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	ement For:
	Full Name of Payee  Jorge Macias  Memo Item	Date of Public Distribution/Dissemination  04  04  04  04  04  05  07  07  07  07  07  07  07  07  07
	Mailing Address 7080 NW 174 Terrace Apt. 104	Amount
	City State Zip Code	465.00
	Miami FL 33015	ransaction ID : D450095 Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	04 / 29 / 2016
	Name of Federal Candidate Support Office 5	Sought: House District:
	DONALD J TRUMP Oppose X P	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	ement For:  Primary
	(a) SUBTOTAL of Itemized Independent Expenditures	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
	Gihan Perera	

[Electronically Filed]

2016

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	age# 20160/159020551656		
	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		70 24 05 70
lE	MIZED INDEPENDENT EXPENDITURES		PAGE 21 OF 78 FOR LINE 24 OF FORM 3X
NΑ	AME OF COMMITTEE (In Full)		
	Torida Freedom PAC		FEC IDENTIFICATION NUMBER ▼
_			C C00521013
Οh	neck if 24-hour report 48-hour report New	w report Amends report	t filed on / Y Y Y Y Y
	Full Name of Payee Julio Cesar Maldonado Rodriguez	🔀 Memo Iten	M M / D D / Y Y Y Y
	Mailing Address 7757 SW 86 Street Apt. C111		04 13 2016 Amount
	City State	Zip Code	346.38
	Miami FL	33143	Transaction ID : D450097  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	04 29 2016
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	X Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2016 Other (specify) ▶
-	Full Name of Payee		
		🗶 Memo Item	Date of Public Distribution/Dissemination
	Maria Patricia Medina	X Memo Iten	Date of Public Distribution/Dissemination  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		X Memo Iten	M M / D D / Y Y Y Y
	Maria Patricia Medina	Zip Code	04 / 13 / 2016
	Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207  City State Miami FL		04 / 13 / 2016  Amount
	Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207  City State	Zip Code	04 / 13 / 2016  Amount  420.00  Transaction ID : D450099
	Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207  City State Miami FL  Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr	Zip Code 33166  Category/ Type 004	Amount  420.00  Transaction ID: D450099  Date of Disbursement or Obligation
	Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207  City State Miami FL  Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report	Zip Code 33166  Category/ Type 004  Support  Oppose	Amount  420.00  Transaction ID: D450099 Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207  City State Miami FL  Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Name of Federal Candidate	Zip Code 33166  Category/ Type  Out  Support  Oppose	Amount  420.00  Transaction ID: D450099  Date of Disbursement or Obligation  04  Office Sought: House District:
	Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207  City State Miami FL  Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Name of Federal Candidate DONALD J TRUMP  Calendar Year-To-Date	Zip Code 33166  Category/ Type 004  Support  Oppose 36278.90	Amount  420.00  Transaction ID: D450099 Date of Disbursement or Obligation  Mod / 29 / 2016  Office Sought: House District:  President Senate State:  Disbursement For: Primary General  Other (specify)
	Maria Patricia Medina  Mailing Address  3700 NW 62 Ave. Apt. 207  City State Miami FL  Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Name of Federal Candidate  DONALD J TRUMP  Calendar Year-To-Date Per Election for Office Sought	Zip Code 33166  Category/ Type 004  Support  Oppose 36278.90	Amount  420.00  Transaction ID: D450099 Date of Disbursement or Obligation  M
	Maria Patricia Medina  Mailing Address  3700 NW 62 Ave. Apt. 207  City State Miami FL  Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Name of Federal Candidate DONALD J TRUMP  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures	Zip Code 33166  Category/ Type  Support  Oppose  36278.90	Amount  420.00  Transaction ID: D450099 Date of Disbursement or Obligation  M

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera	[Electronically Filed]	Date	07 /	15	/	2016
Signature						

NAME OF COMMITTEE (In Full) Florida Freedom PAC

Check if

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITU

HEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDITURES					PAGE 22 FOR LINE	OF 78 24 OF FORM 3X
orida Freedom PAC				FEC I	<b>DENTIFICAT</b> C00521013	ION NUMBER ▼
k if 24-hour report 48-hour report	New re	eport Amends rep	ort filed	i on	/ D = D /	Y
Full Name of Payee Xaviera Ramos		🔀 Memo I	tem	Date of Publ	ic Distribution	n/Dissemination 2016
Mailing Address 2406 San Remo Circle				Amount		
Dity S	tate	Zip Code				359.13
Homestead F	·L	33035		Transaction I Date of Disb	D: D450101 oursement or	Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 Report	48-hr	Category/ Type 004		04	29	2016
Name of Federal Candidate		Support	Office	e Sought:	House	District:
DONALD J TRUMP		Oppose		President	Senate	State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbi 2016		Primar	y X General
Full Name of Payee Henrietta Ricketts		🗷 Memo It	em	Date of Pub	lic Distribution	n/Dissemination 2016
Mailing Address 10601 NW 17 Ave Apt 102				Amount	13	2010
City S	tate	Zip Code				489.38
Miami	FL	33147		Transaction I Date of Disk	D: D450103 oursement or	Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 Report	48-hr	Category/ Type 004		04	29	2016
Name of Federal Candidate		Support	Offic	e Sought:	House	District:
DONALD J TRUMP		Oppose	X	President	Senate	State:
Calendar Year-To-Date Per Election for Office Sought	,	36278.90	Disb 2016		Primar	y X General
a) SUBTOTAL of Itemized Independent Expenditures			▶		1 1 7	0.00
substotal of Unitemized Independent Expenditures	S		··· <b>•</b>			
) TOTAL Independent Expenditures			▶			

Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any ca party committee) any political party committee or its agent.

Gihan Perera	[Electronically Filed]	Date	07 /	15	1	2016
Signature						

NAME OF COMMITTEE (In Full) Florida Freedom PAC

> Full Name of Payee Maria Rivero

Mailing Address

24-hour report

Check if

City

Miami

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

48-hour report

10904 SW 2 Street Apt. 1

New report

Zip Code

33174

State

FL

	PAGE 23 OF 78 FOR LINE 24 OF FORM 33
	FEC IDENTIFICATION NUMBER ▼
	C C00521013
mends report fi	iled on DED / YEYEYEY
▼ Memo Item	Date of Public Distribution/Dissemination
	04 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Amount
	277.50
	Transaction ID : D450105  Date of Disbursement or Obligation
v/ e 004	04 / 29 / 2016
Support Of	ffice Sought: House District:
Oppose	President Senate State:
D:	
	isbursement For:
20	016
90 20	Other (specify)  Other
20	Other (specify) ▶  Date of Public Distribution/Dissemination
90 20	Other (specify) Date of Public Distribution/Dissemination  O4 13 2016  Amount  420.00
20	Other (specify)   Date of Public Distribution/Dissemination  Mo4 / 13 / 2016  Amount
	Other (specify) Date of Public Distribution/Dissemination  O4 13 2016  Amount  420.00  Transaction ID: D450107
20 X Memo Item	Other (specify)  Date of Public Distribution/Dissemination  04  Amount  420.00  Transaction ID: D450107  Date of Disbursement or Obligation
20 X Memo Item	Other (specify) Date of Public Distribution/Dissemination  M
Memo Item  Memo Item  Oppose  Diagram	Other (specify)  Date of Public Distribution/Dissemination  Mo4
Memo Item  // Oppose Di	Other (specify) ▶  Date of Public Distribution/Dissemination  Mod / 13 / 2016  Amount  420.00  Transaction ID : D450107  Date of Disbursement or Obligation  Mod / 29 / 2016  ### Comparison of District:    President   Senate   State:   Senate   S
Memo Item  Memo Item  Support Or Oppose Di	Other (specify)  Date of Public Distribution/Dissemination  Mo4
Memo Item  Very Oo4  Support Or Oppose	Other (specify) ▶  Date of Public Distribution/Dissemination  Mo4 / 13 / 2016  Amount  420.00  Transaction ID : D450107  Date of Disbursement or Obligation  Mo4 / 29 / 2016  fffice Sought: House District:  President Senate State:  isbursement For: Primary General Other (specify) ▶
Memo Item  Very Oo4  Support Or Oppose	Other (specify) ▶  Date of Public Distribution/Dissemination  Mo4 / 13 / 2016  Amount  420.00  Transaction ID : D450107  Date of Disbursement or Obligation  Mo4 / 29 / 2016  fffice Sought: House District:  President Senate State:  isbursement For: Primary General Other (specify) ▶

Purpose of Expenditure Category/ Payment for Canvassing Serv. 4/13-4/20, Disc. on 4/23 48-hr 004 Type Name of Federal Candidate Support Offic DONALD J TRUMP Oppose Disk Calendar Year-To-Date 201 36278.90 Per Election for Office Sought × Memo Item Full Name of Payee Juanita Romera Mailing Address 114 NE 83 Street City State Zip Code Miami FL 33138 Purpose of Expenditure Category/ Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr 004 Type Report Name of Federal Candidate Support Offi DONALD J TRUMP Oppose Dis Calendar Year-To-Date 36278.90 201 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gihan Perera [Electronically Filed] 2016 15 Date Signature

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 24 OF 78 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼  C C00521013
M M / D D / Y Y Y Y
ed on
Date of Public Distribution/Dissemination
04
Amount
492.00 Transaction ID : D450109
Date of Disbursement or Obligation
04 / 29 / 2016
ice Sought: House District:
President Senate State:
sbursement For: Primary General  Other (specify)   Other

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC				C C00521013
				O coordinate
Check if 24-hour report 48-hour r	report New report	ort Amends repo	rt filed	on Man / Dad / Yayayay
Full Name of Payee		🔀 Memo Ite	em	Date of Public Distribution/Dissemination
Ivan Zuleta				04 13 2016
Mailing Address 3501 W 11 Avenue Apt.	113			
				Amount
City	State	Zip Code		492.00
Hialeah	FL	33012		Transaction ID : D450109  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Report	Disc. on 4/23 48-hr	Category/ Type 004		04 29 7 2016
Name of Federal Candidate		Support	Office	Sought: House District:
DONALD J TRUMP		X Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbu 2016	orsement For: Primary
Full Name of Payee	<u> </u>	🗙 Memo Ite	m	Date of Public Distribution/Dissemination
Ysis Perez				M = M / D = D / Y = Y = Y
Mailing Address 20020 NW 64 Court				04 13 2016
20020 NW 64 Court				Amount
City	State	Zip Code		187.50
Hialeah	FL	33015		Transaction ID : D450113  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Report	Disc. on 4/23 48-hr	Category/ Type 004		04 29 2016
Name of Federal Candidate		Support	Office	e Sought: House District:
DONALD J TRUMP		Oppose		President Senate State:
Calendar Year-To-Date		20272.00		ursement For: Primary X General
Per Election for Office Sought		36278.90	2016	Other (specify)
(a) SUBTOTAL of Itemized Independent E	Expenditures		. ▶	0.00
(b) SUBTOTAL of Unitemized Independen	nt Expenditures		. •	
(c) TOTAL Independent Expenditures				
				4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1
	independent expenditures ny candidate or authorized			ade in cooperation, consultation, or concert r, or (if the reporting entity is not a political
with, or at the request or suggestion of, a	independent expenditures ny candidate or authorized ittee or its agent.		f either	r, or (if the reporting entity is not a political

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SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 25 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee Memo Item Antonio Williams	ate of Public Distribution/Dissemination
Mailing Address 3895 NW 183 Street	04 13 2016
Ar	mount
City State Zip Code	75.00
	nsaction ID : D450117 ate of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	04 29 2016
Name of Federal Candidate Support Office So	ought: House District:
DONALD J TRUMP	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburser 2016	ment For:
	ate of Public Distribution/Dissemination
Laura Coache	04 13 2016
Mailing Address 12599 NE 2nd Ave Ar	mount
City State Zip Code	75.00
	ansaction ID: D450119 ate of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/20, Disc. on 4/23 48-hr Report  Category/ Type 004	04 29 2016
Name of Federal Candidate Support Office Sc	ought: House District:
DONALD J TRUMP	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburses 2016	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Gihan Perera	/ D D / Y Y Y

[Electronically Filed]

2016

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Gihan Perera

Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES		70
TEMIZED INDEPENDENT EXPENDITURES		PAGE 26 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC		C C00521013
Check if 24-hour report 48-hour report Ne	ew report Amends report	filed on M M M / D = D / Y = Y = Y
Full Name of Payee Kimberly Hansack	🔀 Memo Iter	Date of Public Distribution/Dissemination  04  04  04  04  04  05  06  07  08  09  09  09  09  09  09  09  09  09
Mailing Address 15501 NE 6th Ave		Amount
Apt D415		Amount
City State	Zip Code	75.00
North Miami Beach FL	33162-5146	Transaction ID : D450122  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/20, Disc. on 4/23 48-hr Report	Category/ Type 004	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General  2016 ☐ Other (specify) ▶
Full Name of Payee	X Memo Item	Date of Public Distribution/Dissemination
Fidel Pineda		04 13 2016
Mailing Address 11960 Tuttle Blvd.		Amount
City State	Zip Code	269.25
Miami FL	33184	Transaction ID : D450124  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	04 / 29 / 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: Primary General 2016 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>•</b>
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expending with, or at the request or suggestion of, any candidate or authors party committee) any political party committee or its agent.		

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# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 27 OF 78 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00521013
M / D D / Y Y Y Y Y
f Public Distribution/Dissemination
04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt
225.00
ction ID : D450127 f Disbursement or Obligation
04 / 29 / 2016
: House District:
nt Senate State:
For: Primary X General
her (specify) ▶
of Public Distribution/Dissemination
04 / 13 / Y Y Y Y Y Y
nt
465.00
ction ID : D450129 of Disbursement or Obligation
04 / 29 / 2016
t: House District:
ent Senate State:
For: Primary X General
Timary Z deficition
ther (specify) •
ther (specify)

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed of	n M = M / D = D / Y = Y = Y
	Date of Public Distribution/Dissemination
Maria Aviles	04 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1510 E Mowry Drive Apt 203	Amount
City State Zip Code	225.00
	ransaction ID : D450127 Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type  004	04
Name of Federal Candidate Support Office S	Sought: House District:
DONALD J TRUMP Oppose Donald Provided P	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	sement For: Primary X General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Julio Agredo	Date of Public Distribution/Dissertification  04 13 2016
	Amount
Apt 7 City State Zip Code	465.00
Miami FL 33128-1156 Ti	ransaction ID : D450129 Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type  004	04 / 29 / 2016
Name of Federal Candidate Support Office S	Sought: House District:
DONALD J TRUMP Oppose Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	sement For: Primary ☐ General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Gihan Perera [Electronically Filed] Date	15 2016
Signature	

TEMIZED INDEPENDENT EXPENDITURES	PAGE 28 OF 78
TEMPER MADE ENGLISHED	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Audrey Hansack  Memo Item Date of	of Public Distribution/Dissemination
Mailing Address 5712 NW 3 Ave Amount	04 13 2016
	III.
City State Zip Code	187.50
	ction ID: D450131 of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	04 29 / 2016
Name of Federal Candidate Support Office Sough	it: House District:
DONALD J TRUMP    Oppose   Preside	
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016	of For: Primary X General Other (specify) ▶
Full Name of Payee	of Public Distribution/Dissemination
Mailing Address 1620 NW 128th St Amou	int
City State Zip Code	127.50
110111111111111111111111111111111111111	of Disbursement or Obligation
Purpose of Expenditure	04 / 29 / 2016
Name of Federal Candidate Support Office Sough	nt: House District:
DONALD J TRUMP Oppose Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016	nt For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Gihan Perera  [Electronically Filed] Date	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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Gihan Perera

Signature

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDITUF	₹ES		PAGE 29 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC			C C00521013
Check if 24-hour report 48-hour report	New repo	oort Amends repo	ort filed on
Full Name of Payee Maribel Macias		🔀 Memo Ito	M M / D D / Y Y Y Y
Mailing Address 17860 SW 107th Ave			04 13 2016 Amount
Apt 23			Alloun
City	State	Zip Code	127.50
Miami  Purpose of Expanditure	FL	33157-5116	Transaction ID : D450135  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/20, Disc. Report	on 4/23 48-hr	Category/ Type 004	04 / 29 / 2016
Name of Federal Candidate		Support	Office Sought: House District:
DONALD J TRUMP		X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For:  Primary  General 2016  Other (specify) ▶
Full Name of Payee Odalis Martinez		🗷 Memo Ite	em Date of Public Distribution/Dissemination
Mailing Address 14921 SW 82nd Ln			04 13 2016
Apt 19			Amount
City	State	Zip Code	127.50
Miami  Purpose of Expanditure	FL	33193-3113	Transaction ID : D450137  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/20, Disc. Report	on 4/23 48-hr	Category/ Type 004	M 04 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
DONALD J TRUMP		X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For:  Primary  General 2016   Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	ditures		▶ 0.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures		
(c) TOTAL Independent Expenditures			··· •
	ndidate or authorized		e not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

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S	CHEDULE E (FEC Form 3X EMIZED INDEPENDENT EXPENDI	() ITURES				PAGE 30	OF 78
						FOR LINE 24	OF FORM 3X
	AME OF COMMITTEE (In Full) Florida Freedom PAC				FEC II	DENTIFICATION	NUMBER ▼
١	ionda i reedom r AC				С	C00521013	
CI	neck if 24-hour report 48-hour re	eport New rep	ort Amends repo	ort filed o	on Man		Y
	Full Name of Payee		🔀 Memo It	tem	Date of Publi	c Distribution/D	issemination
	Orlando Palma				M M M	13	2016
	Mailing Address 328 NE 57th St				Amount	10	2010
	City	State	Zip Code				127.50
	Miami	FL	33137-2543		ransaction II Date of Disbu	<b>D : D450139</b> ursement or Ob	ligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/20, Report	Disc. on 4/23 48-hr	Category/ Type 004		04	29 /	2016
	Name of Federal Candidate		Support	Office \$	Sought:	House D	istrict:
	DONALD J TRUMP		Oppose		President		State:
	Colonday Voor To Doto				sement For:	Primary	X General
	Calendar Year-To-Date Per Election for Office Sought		36278.90	2016	Other (sp		Z denoral
	Full Name of Payee		X Memo Ite	em		ic Distribution/D	issemination
	Steve Luis		_		04	/ 13 /	2016
	Mailing Address 2341 SW 11 Street				04	13	2016
	2341 GW 11 Glicet				Amount		
	City	State	Zip Code		: : :		174.92
	Miami	FL	33135		ransaction II	D: D450142 ursement or Ob	oligation
	Purpose of Expenditure Payment for Fncl. Mgmt. Serv. of Canvass Disc. on 4/23 48-hr Report	sing Prog. 4/13-4/27,	Category/ Type 004		04	29	2016
	Name of Federal Candidate		Support	Office	Sought:	House D	istrict:
	DONALD J TRUMP		X Oppose	X	President	Senate	State:
	Calendar Year-To-Date			Disburs	sement For:	Primary	X General
	Per Election for Office Sought		36278.90	2016	Other (s	pecify) ▶	
	(a) SUBTOTAL of Itemized Independent E	xpenditures		▶			0.00
	(b) OUDTOTAL of Helicaria d Indonesia	I. E. a. a. d'Itama					
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		·· •			
	(c) TOTAL Independent Expenditures						
	(b) TO THE INCOPORTION EXPONENTIAL CO			•	-	7	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commit	ny candidate or authorized					
	Gihan Perera			M = 1	M / D D	/ ٧ ٧ .	

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NAME OF COMMITTEE (In Full)

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE 31 FOR LINE 2	OF 78 24 OF FORM 3X				
FEC IDE	NTIFICATI	ON NUMBER ▼				
C C00521013						
- M /	D   D /	Y = Y = Y = Y				
of Public	Distribution	/Dissemination				
04	13	2016				
nt						
		961.52				
	D450145 sement or (	Obligation				
04	29	2016				
it:	House	District:				
ent	Senate	State:				
t For:	Primary	/ X General				
ther (spe	cify) ►					
	Distribution	n/Dissemination				
04	13	2016				
ınt						
		158.65				
oction ID : D450149 of Disbursement or Obligation						
04	29	2016				
nt:	House	District:				
ent	Senate	State:				
nt For:	Primar	y X General				
ther (spe	cify) 🕨					
		0.00				

Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report Amends report	filed on M M / D D / Y Y Y Y
Full Name of Payee   Memo Item	Date of Public Distribution/Dissemination
David McDougal	04 13 2016
Mailing Address 4231 NW 11th PI	Amount
City State Zip Code	961.52
Miami FL 33127-2710	Transaction ID : D450145  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Field Director Serv. 4/13-4/27, Disc. on 4/23 48-hr Report  Category/ Type 004	04 / 29 / 2016
Name of Federal Candidate Support C	Office Sought: House District:
DONALD J TRUMP Oppose	President Senate State:
Calendar Year-To-Date	Disbursement For: Primary X General
	2016 Other (specify) ▶
Full Name of Payee X Memo Item	
Victricia Chandler	M = M / D = D / Y = Y = Y = Y
Mailing Address 20130 SW 104th Ct	04 13 2016
20130 SW 104th Ct	Amount
City State Zip Code	158.65
Cutler Bay FL 33189-1308	Transaction ID : D450149  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Operations Dir. Serv. 4/13-4/27, Disc. on 4/23 48- hr Report  Category/ Type 004	04 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
DONALD J TRUMP Oppose	President Senate State:
	Disbursement For: Primary X General
	2016 Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures	0.00
Under penalty of perjury I certify that the independent expenditures reported herein were nowith, or at the request or suggestion of, any candidate or authorized committee or agent of exparty committee) any political party committee or its agent.	
Gihan Perera [Electronically Filed] Dete	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date	07 15 2016
	ı

mage# 201607159020551667		
SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES		PAGE 32 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC		C C00521013
Check if 24-hour report 48-hour report New re	report Amends repor	rt filed on
Full Name of Payee Giovanny Navarro	🔀 Memo Ite	Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  13 / 2016
Mailing Address 8410 SW 150th Ave		Amount
Apt 104		
City State	Zip Code	403.84
Miami FL	33193-1419	Transaction ID : D450154  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Campaign Mgmt. Serv. 4/13-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	04 29 7 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
Full Name of Payee Daniel Garcia	<b>⋈</b> Memo Iter	Date of Public Distribution/Dissemination  04  04  04  04  04  05  06  07  07  07  07  07  07  07  07  07
Mailing Address 2514 NW 94th Ave		Amount
City State	Zip Code	384.60
Coral Springs FL	33065-4920	Transaction ID : D450157  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Quality Control Coord. Serv. 4/13-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	04 / 29 / 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		•

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(c) TOTAL Independent Expenditures.....

Gihan Perera	[Electronically Filed]	Date	07 /	15	/	2016
Signature						

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Gihan Perera

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 33 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC		C C00521013
Ch	heck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on
	Full Name of Payee Frank Bigus	🔀 Memo Ite	Date of Public Distribution/Dissemination  04  04  04  04  04  05  07  07  07  07  07  07  07  07  07
	Mailing Address 9674 NW 10th Ave		Amount
	Lot H812		275
	City State Miami FL	Zip Code 33150-1839	37.50  Transaction ID : D455047  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/21-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	04 29 2016
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	∑ Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For:  Primary
	Full Name of Payee Alina Chavez	🗷 Memo Ite	Date of Public Distribution/Dissemination  04  04  04  04  04  05  07  07  07  07  07  07  07  07  07
	Mailing Address 195 Grand Canal Drive		Amount
	City State	Zip Code	37.50
	Miami FL	33144	Transaction ID : D455056  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/21-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	04 / 29 / 2016
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For:  Primary  General 2016  Gther (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		• 0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		-
_	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

[Electronically Filed]

2016

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Gihan Perera

Signature

3(	CHEDULE E (FEC Form 3X)				
TI	EMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 78
VI.	AME OF COMMITTEE (In Full)			1	FOR LINE 24 OF FORM 3X
	Florida Freedom PAC			FEC	IDENTIFICATION NUMBER ▼
				C	C00521013
Cł	neck if 24-hour report 48-hour report N	lew report	Amends repo	rt filed on	/ D = D / Y = Y = Y
	Full Name of Payee Gloria Lopez		🔀 Memo Ito	Date of Pub	olic Distribution/Dissemination
	Mailing Address 704 NIW 4444 Ct			04	20 2016
	701 NW 111th Ct			Amount	
	Apt 2 City State	7ir	o Code		37.50
	Miami FL		3172-3783		ID: D455060 bursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/20-4/27, Disc. on 4/23 48-hr Report	C	Category/ Type 004	M 04	29 / 2016
	Name of Federal Candidate		Support	Office Sought:	House District:
	DONALD J TRUMP		X Oppose	President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For: 2016 Other (	Primary
	Full Name of Payee Georgina Musa		🗷 Memo lte	Date of Pul	blic Distribution/Dissemination
	Mailing Address 3803 SW 82nd Ave Apt 9			Amount	
	City State	Zij	p Code		37.50
	Miami FL		3155-6710		ID: D455061 Sursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/20-4/27, Disc. on 4/23 48-hr Report	.	Category/ Type 004	04	29 / 2016
	Name of Federal Candidate		Support	Office Sought:	House District:
	DONALD J TRUMP		Oppose	President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For: 2016 Other (	Primary X General
	(a) SUBTOTAL of Itemized Independent Expenditures			<b>&gt;</b>	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures			<b>•</b>	p. 1. 4. 1. 4. 1.
	(c) TOTAL Independent Expenditures			<b>.</b>	7
	Under penalty of perjury I certify that the independent exper with, or at the request or suggestion of, any candidate or aut party committee) any political party committee or its agent.				

[Electronically Filed]

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	age# 20100/1390203310/0						
	CHEDULE E (FEC Form 3)						
П	EMIZED INDEPENDENT EXPEND	HURES				PAGE 35	OF 78 24 OF FORM 3X
NZ	AME OF COMMITTEE (In Full)						
	Florida Freedom PAC				FEC II	DENTIFICATI	ON NUMBER ▼
_	101144 1 10040111 1 110				C	C00521013	
Cł	neck if 24-hour report 48-hour	report New report	ort Amends repo	ort filed o	on M M	/ D D /	Y
	Full Name of Payee		✓ Memo It	em	Date of Publi	c Distribution	/Dissemination
	Dariena Ortega Penalva				M M M 04	/ 20 /	2016
	Mailing Address 195 Grand Canal Dr				Amount		
	City	State	Zip Code				37.50
	Miami	FL	33144-2527	Т	ransaction II	D : D455063	0.100
			1			ursement or (	Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/20-4/27, Report	, Disc. on 4/23 48-hr	Category/ Type 004		04	29	2016
	Name of Federal Candidate		Support	Office	Sought:	House	District:
	DONALD J TRUMP		Oppose		President [	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disburs 2016	sement For:	Primary	/ X General
	Full Name of Payee		X Memo Ite	em			/Dissemination
	Elbert Garcia				M M M O4	/ 28 /	2016
	Mailing Address 260 SW 29th Rd					20	2010
					Amount		
	City	State	Zip Code				625.00
	Miami	FL	33129-2722	1	Transaction I	D: D455058 ursement or	Obligation
	Purpose of Expenditure		Category/		M M	/ D D /	Y Y Y Y
	Payment for Canvassing Serv. 4/28-5/4, Report	Disc. on 5/6 48-hr	Type 004	_	05	03	2016
	Name of Federal Candidate		Support	Office	Sought:	House	District:
	DONALD J TRUMP		Oppose	X	President	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbur 2016	sement For: Other (s	Primary	y Seneral
_					Other (3	респу)	
	(a) SUBTOTAL of Itemized Independent	Expenditures					0.00
	(b) SUBTOTAL of Unitemized Independe	nt Expenditures		. •			
	(a) TOTAL Independent 5						
	(c) TOTAL Independent Expenditures			•			
	Under penalty of perjury I certify that the	independent expenditures	reported herein were	not mad	de in coopera	tion, consulta	tion, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera	[Electronically Filed]	Date	07	15	2016
Signature					

Gihan Perera

Signature

CHEDULE E (FEC Form EMIZED INDEPENDENT EXPE			PAGE 36 OF 78 FOR LINE 24 OF FORM 3
IAME OF COMMITTEE (In Full)			
Florida Freedom PAC			C C00521013
Check if 24-hour report 48-hour	our report New re	eport Amends repo	ort filed on Mam / Dad / Yayayay
Full Name of Payee		<b>⋈</b> Memo l	tem Date of Public Distribution/Dissemination
Costco Wholesale			04 21 2016
Mailing Address 14585 Biscayne Blv	⁄d		Amount
City	State	Zip Code	36.15
North Miami	FL	33181	Transaction ID : D450169  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Supplies for 48-hr Report	4/13-5/15, Discl on 4/23	Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
DONALD J TRUMP		X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For:  Primary  General 2016  Other (specify) ▶
Full Name of Payee Alicia Alzuri		🗷 Memo Ita	Date of Public Distribution/Dissemination  04  04  04  04  04  05  06  07  08  09  09  09  09  09  09  09  09  09
Mailing Address 9214 SW 147 Ct.			Amount
City	State	Zip Code	380.63
Miami	FL	33196	Transaction ID : D450091  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4 Report	1/20, Disc. on 4/23 48-hr	Category/ Type 004	05 / 13 / 2016
Name of Federal Candidate		Support	Office Sought: House District:
DONALD J TRUMP		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For:  Primary  General 2016   Other (specify) ▶
(a) SUBTOTAL of Itemized Independent	ent Expenditures		▶ 0.00
(b) SUBTOTAL of Unitemized Indepe	ndent Expenditures		··· <b>&gt;</b>
(c) TOTAL Independent Expenditures			· •
	of, any candidate or authoriz		e not made in cooperation, consultation, or concer of either, or (if the reporting entity is not a politica

[Electronically Filed]

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	PAGE		OF	78		
	FOR LIN	IE 24	OF F	ORM 3	×	
DENTIFICATION NUMBER ▼						
υ	ENTIFIC	AHO	N NUN	IBEK 1	<b>'</b>	
	C005210	-	N NUN	IBER V		

			FOR LINE	E 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICA	TION NUMBER ▼
Florida Freedom PAC			C C00521013	3
Check if 24-hour report 48-hour report New rep	port Amends report		M / D = D	/
Full Name of Payee	▼ Memo Iten	n Date o	f Public Distribution	on/Dissemination
Alicia Alzuri			04 / D D D 21	/ Y Y Y Y Y Y 2016
Mailing Address 9214 SW 147 Ct.		Amour	nt	
City State	Zip Code			287.59
Miami FL	33196		ction ID : D450092 of Disbursement o	
Purpose of Expenditure Payment for Canvassing Serv. 4/21-4/27, Disc. on 4/23 48-hr Report	Category/ Type 004	M	05 13	2016
Name of Federal Candidate	Support	Office Sought	:: House	District:
DONALD J TRUMP	X Oppose	X Preside	nt Senate	State:
Calendar Year-To-Date		Disbursement	For: Prima	ary X General
Per Election for Office Sought	30270.30		her (specify) ► _	
Full Name of Payee Krizia Barker	🔀 Memo Item	Date	of Public Distributi	on/Dissemination
Mailing Address 7540 Advanture Ave		L	04 13	2016
7540 Adventure Ave		Amour	nt	
City State	Zip Code			228.00
North Bay Village FL	33141		ction ID : D45011 of Disbursement of	
Purpose of Expenditure Payment for Canvassing Serv. 4/13-4/20, Disc. on 4/23 48-hr Report	Category/ Type 004		05 / 13	2016
Name of Federal Candidate	Support	Office Sough	t: House	District:
DONALD J TRUMP	Oppose	X Preside	ent Senate	State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement 2016 O	t For: Primather (specify) ► _	ary X General
(a) SUBTOTAL of Itemized Independent Expenditures		· [	7	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		· [		
(c) TOTAL Independent Expenditures		· [		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.				
Gihan Perera [Electron	nically Filed]	07 /	15 / 2	2016
Signature	Date	Ÿ,	.,	

	CHEDULE E (FEC Form 3X EMIZED INDEPENDENT EXPENDI				PAGE 38 OF 78 FOR LINE 24 OF FORM 3X
N/	AME OF COMMITTEE (In Full)				<u> </u>
	lorida Freedom PAC				FEC IDENTIFICATION NUMBER ▼
					C C00521013
Ch	eck if 24-hour report 48-hour re	eport New rep	ort Amends repo	ort filed	d on M = M / D = D / Y = Y = Y
	Full Name of Payee Zulema Camacho		🔀 Memo It	em	Date of Public Distribution/Dissemination
	Mailing Address 100 SW 83 Way Apt. 102	2			04 28 2016 Amount
	City	State	Zip Code		300.00
	Pembroke Pines	FL	33025		Transaction ID: D450638  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, D Report	isc. on 5/6 48-hr	Category/ Type 004		05 / 13 / Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office	e Sought: House District:
	DONALD J TRUMP		X Oppose	X	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbu 2016	ursement For: Primary
	Full Name of Payee		X Memo Ite	em	Date of Public Distribution/Dissemination
	Judith Cruz				04 28 2016
	Mailing Address 8181 NW S River Drive A	Apt. 145			Amount
	City	State	Zip Code		313.74
	Medley	FL	33166		Transaction ID : D450641  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, D Report	isc. on 5/6 48-hr	Category/ Type 004		05 13 2016
	Name of Federal Candidate		Support	Offic	ce Sought: House District:
	DONALD J TRUMP		X Oppose	X	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbi 2016	oursement For: Primary General  Other (specify)   Other
	(a) SUBTOTAL of Itemized Independent E	xpenditures		▶	0.00
	(b) SUBTOTAL of Unitemized Independent	Expenditures		·· •	
	(c) TOTAL Independent Expenditures			·· •	
		y candidate or authorized			nade in cooperation, consultation, or concert er, or (if the reporting entity is not a political
	Gihan Perera	[Electron	nically Filed]		07 15 2016

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# S

Gihan Perera

Signature

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 39 OF 78
IAME OF COMMITTEE (In Full)		FOR LINE 24 OF FORM 3X
Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼
		C C00521013
Check if 24-hour report 48-hour report New	report Amends report	t filed on
Full Name of Payee Miladis Diaz	🔀 Memo Iter	M M / D D / Y Y Y Y
Mailing Address 9 E 4th St		04 28 2016 Amount
Apt 102		Amount
City State	Zip Code	530.82
Hialeah FL	33010-6258	Transaction ID : D450644  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / D D / Y Y Y Y Y Y 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2016 Other (specify) ▶
Full Name of Payee Pedro Gonzalez	🗷 Memo Iten	Date of Public Distribution/Dissemination  04
Mailing Address 915 NW 1st Ave		Amount
Apt H2512 City State	Zin Code	375.00
City State Miami FL	Zip Code 33136-3560	Transaction ID : D450646  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / 13 / 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>•</b>
(c) TOTAL Independent Expenditures		<b>&gt;</b>
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		

[Electronically Filed]

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TI	EMIZED INDEPENDENT EXPENDITURES					PAGE 40 OF 78 FOR LINE 24 OF FORM 3X		
	AME OF COMMITTEE (In Full)					FEC IDENTIFICATION NUMBER ▼		
_	Florida Freedom PAC					C C00521013		
_ Cł	heck if 24-hour report 48-hour report	New repo	ort Am	ends repo	ort filed on	M = M / D = D / Y = Y = Y = Y		
	Full Name of Payee		Σ	<b>⋉</b> Memo Ite	em Date	e of Public Distribution/Dissemination		
	Jose Miguel Gonzalez Ortiz				[	04 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 1321 NW 42 Street Rear				Amo	punt		
	City	State	Zip Code		<del></del>	439.50		
	Miami	FL	33142			e of Disbursement or Obligation		
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	48-hr	Category/ Type	004	$\exists \mid \llbracket$	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Name of Federal Candidate			Support	Office Soug	ght: House District:		
	DONALD J TRUMP			Oppose	X Presid			
	Calendar Year-To-Date		(F v)	<u></u> -	Disburseme			
	Per Election for Office Sought		36278.90		2016	Other (specify)		
	Full Name of Payee		×	Memo Ite		e of Public Distribution/Dissemination		
	Olvin Henriquez					M - M / D - D / Y - Y - Y		
	Mailing Address					04 28 2016		
	3351 SW 24 Terrace				Amo	ount		
	City	State	Zip Code			225.00		
	Miami	FL	33145			saction ID : D450650 e of Disbursement or Obligation		
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	i 48-hr	Category/ Type	004	]   [	05 / 13 / 2016		
	Name of Federal Candidate			Support	Office Soug	ght: House District:		
	DONALD J TRUMP		X	Oppose	X Presid	ident Senate State:		
	Calendar Year-To-Date				Disburseme	ent For: Primary X General		
	Per Election for Office Sought		36278.90		2016	Other (specify) ▶		
						Other (openity)		
	(a) SUBTOTAL of Itemized Independent Expenditure	<del>)</del> S			· •	0.00		
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures			· • [			
	(c) TOTAL Independent Expenditures							
	Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized						
	Gihan Perera	[Electron	ically Filed]	Date	e 07 /	15 2016		
	Signature		_	Date				

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MIZED INDEPENDENT EXPENDITURES						PAGE 41	OF 78 24 OF FORM 3
E OF COMMITTEE (In Full)					FEC	IDENTIFICAT	ION NUMBER 1
orida Freedom PAC						C00521013	ION NOMBER
					U	C00521013	
ck if 24-hour report 48-hour report	New rep	ort Am	ends repo	rt filed o	on Man	/ D   D	Y
Full Name of Payee Alicia Alzuri		Þ	<b>≺</b> Memo It	em	Date of Pu	blic Distributio	n/Dissemination
					04	/ 28	2016
Mailing Address 9214 SW 147 Ct.					Amount		
Dity State	9	Zip Code					287.60
Miami FL		33196				ID: D450652 sbursement or	Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report		Category/ Type	004		05	13	2016
Name of Federal Candidate			Support	Office	Sought:	House	District:
DONALD J TRUMP		$\times$	Oppose	X	President	Senate	State:
Calendar Year-To-Date Per Election for Office Sought		36278.90		Disburs 2016	sement For		y X Genera
Full Name of Pause	,	V	Memo Ite	m		(specify) -	/D: : ::
Full Name of Payee Humberto Iglesias			wemo ne		Date of Pu	blic Distributio	n/Dissemination 2016
Mailing Address 8181 NW South River Drive Apt. A14					Amount		
City Stat	e	Zip Code					496.50
Medley FL		33166		Т		ID: D450654 sbursement or	Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	,	Category/ Type	004		05	13	2016
Name of Federal Candidate		<u>'</u>	Support	Office	Sought:	House	District:
DONALD J TRUMP			Oppose	X	President	Senate	State:
Calendar Year-To-Date Per Election for Office Sought		36278.90			sement For		ry X Genera
To Elocion to Ollide Godgitt	7				Other	(specify) ► _	
SUBTOTAL of Itemized Independent Expenditures				•		7	0.00
o) SUBTOTAL of Unitemized Independent Expenditures				. •		<i>-</i>	
r) TOTAL Independent Expenditures						<i>-</i>	1 4

Gihan Perera [Electronically Filed] 15 2016 07 Date Signature

TEMIZED INDEPENDENT EXPENDITUR	356			24.05 42 05 79
IEMIZED INDEPENDENT EXPENDITOR	(ES			PAGE 42 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FI	EC IDENTIFICATION NUMBER ▼
Florida Freedom PAC				C00521013
Check if 24-hour report 48-hour report	New re	report Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Viky Lara		🔀 Memo It	М =	Public Distribution/Dissemination
Mailing Address 11960 Tuttle Blvd.			O4 Amount	28 2016
City	State	Zip Code		375.00
Miami	State FL	2ip Code 33184	Transacti	on ID : D450655
				Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. o Report	n 5/6 48-hr	Category/ Type 004	05	
Name of Federal Candidate		Support	Office Sought:	House District:
DONALD J TRUMP		X Oppose	X President	Senate State:
Calendar Year-To-Date			Disbursement F	
Per Election for Office Sought		36278.90	2016	er (specify)
Full Name of Payee				Public Distribution/Dissemination
Jorge Macias				M / D D / Y Y Y Y
Mailing Address 7000 NW 474 Torrace Act 10			0.	4 28 2016
7080 NW 174 Terrace Apt. 10	4		Amount	
City	State	Zip Code		412.50
Miami	FL	33015	1	ion ID : D450657
Purpose of Expenditure		Ostson/		Disbursement or Obligation
Payment for Canvassing Serv. 4/28-5/4, Disc. o Report	ın 5/6 48-hr	Category/ Type 004	0.5	
Name of Federal Candidate		Support	Office Sought:	House District:
DONALD J TRUMP		Oppose	X President	Senate State:
Calendar Year-To-Date			Disbursement F	For: Primary X General
Per Election for Office Sought		36278.90	2016 Othe	er (specify) •
<u>'</u>				
(a) SUBTOTAL of Itemized Independent Expendent	ditures		<b>•</b>	0.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures		· •	7 7
(c) TOTAL Independent Expenditures			<b>•</b>	7 1 7 1 7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee or	ndidate or authoriz			
Gihan Perera	[Electr	ronically Filed] Date	07	15 2016

TEMIZED INDEPENDENT EXPENDITUR	₹ES			PAGE 43 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC				C C00521013
Check if 24-hour report 48-hour report	New re	eport Amends repo		M / D D / Y Y Y Y
Full Name of Payee Julio Cesar Maldonado Rodriguez		🔀 Memo It	M	of Public Distribution/Dissemination
Mailing Address 7757 SW 86 Street Apt. C111			Amour	04 28 2016 nt
City	State	Zip Code	—  [-	313.74
Miami	FL	33143		ction ID : D450659  of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. or Report	n 5/6 48-hr	Category/ Type 004		05 13 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought	: House District:
DONALD J TRUMP		∑ Oppose		
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement	
Full Name of Payee Maria Patricia Medina  Mailing Address 3700 NW 62 Ave. Apt. 207		<b>⊠</b> Memo Ite	Bate	of Public Distribution/Dissemination  04 28 2016
City	State	Zip Code	-	412.50
Miami	FL	33166		ction ID : D450661  If Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. o Report	ın 5/6 48-hr	Category/ Type 004		05 / 13 / 2016
Name of Federal Candidate		Support	Office Sought	t: House District:
DONALD J TRUMP		X Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement 2016	t For: Primary X General
(a) SUBTOTAL of Itemized Independent Expendent	ditures			0.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures		· • [	7 7
(c) TOTAL Independent Expenditures			·· •	7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorize			
Gihan Perera	[Electre	onically Filed]	07	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITU	JRES			PAGE 44 OF 78
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Florida Freedom PAC		<u> </u>	_	FEC IDENTIFICATION NUMBER ▼
FIUIUA FIEEUUIII I AO				C C00521013
Check if 24-hour report 48-hour repo	ort New repo	port Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Xaviera Ramos		🔀 Memo Ito	Date	of Public Distribution/Dissemination
Mailing Address 2406 San Remo Circle			Amou	
City	State	Zip Code	— [	522.90
Homestead	FL	33035		action ID : D450663 of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. Report	on 5/6 48-hr	Category/ Type 004		05 / Day / 2016
Name of Federal Candidate		Support	Office Soug	ht: House District:
DONALD J TRUMP		X Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement 2016	ent For:
Full Name of Payee Henrietta Ricketts		🗷 Memo Ite	Date	e of Public Distribution/Dissemination  04 / 28 / 2016
Mailing Address 10601 NW 17 Ave Apt 102			Amo	ount
City	State	Zip Code		522.90
Miami	FL	33147		saction ID : D450665 e of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc Report	c. on 5/6 48-hr	Category/ Type 004		05 / 13 / 2016
Name of Federal Candidate		Support	Office Soug	ght: House District:
DONALD J TRUMP		X Oppose	X Presid	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disburseme 2016	ent For:  Primary
(a) SUBTOTAL of Itemized Independent Expe	enditures		· [	0.00
(b) SUBTOTAL of Unitemized Independent E.	xpenditures		· •	
(c) TOTAL Independent Expenditures			· • [	7
Under penalty of perjury I certify that the ind- with, or at the request or suggestion of, any of party committee) any political party committee	candidate or authorized			
Gihan Perera			M M /	

[Electronically Filed]

2016

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## SCHEDULE E (FEC Form 3X)

SOFIEDOLL L (FEO FORM OX)		
TEMIZED INDEPENDENT EXPENDITURES		PAGE 45 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC		C C00521013
Check if 24-hour report 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	X Memo Item □	ate of Public Distribution/Dissemination
Juanita Romera		04 28 2016
Mailing Address 114 NE 83 Street	A	mount
City State Zip Cod	le	412.50
Miami FL 33138	Tra	ansaction ID : D450667 late of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category		05 / 13 / 2016
Name of Federal Candidate	Support Office So	ought: House District:
DONALD J TRUMP		esident Senate State:
Calendar Year-To-Date Per Election for Office Sought 36278		ement For: Primary X General
Tel Election for Cinec Sought		Other (specify) -
Full Name of Payee  Ivan Zuleta	<b>⋈</b> Memo Item D	Date of Public Distribution/Dissemination
Mailing Address		04 28 2016
3501 W 11 Avenue Apt. 113	A	mount
City State Zip Coc	de	426.69
Hialeah FL 33012		ansaction ID : D450669 Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category	ory/ ype 004	05 / 13 / 2016
Name of Federal Candidate	Support Office Se	ought: House District:
DONALD J TRUMP	Oppose Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought 36278		ement For: Primary X General
Per Election for Office Sought	3.90	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	······	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committed party committee) any political party committee or its agent.		
Gihan Perera [Electronically File	edl O7	/ D D / Y Y Y Y Y Y
Signature	Date 07	15 2016

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		D. 05 40	
	EMIZED INDEPENDENT EXPENDITURES		PAGE 46 FOR LINE 24	OF 78 FORM 3X
	AME OF COMMITTEE (In Full)	FEC	IDENTIFICATIO	N NUMBER ▼
F	Florida Freedom PAC	С	C00521013	
С	heck if 24-hour report 48-hour report New report Amends report f	filed on	/ D D /	Y = Y = Y
	Full Name of Payee Memo Item	Date of Pu	blic Distribution/D	issemination
	Ysis Perez	M M M 04	/ D D / 28	2016
	Mailing Address 20020 NW 64 Court	Amount		
	City State Zip Code			575.19
	Hialeah FL 33015		ID: D450671 sbursement or Ob	oligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category/ Type  004	05	13	2016
	Name of Federal Candidate Support C	Office Sought:	House D	District:
	DONALD J TRUMP Oppose	X President	Senate	State:
	Calcillati Ical Io Date	Disbursement Form	: Primary (specify) ▶	X General
	Full Name of Payee   Memo Item		blic Distribution/[	Dissemination
	Antonio Williams	M M 04	/ P P / 28	2016
	Mailing Address 3895 NW 183 Street	Amount	20	2010
	City State Zip Code			262.50
	Miami Gardens FL 33055		ID: D450673 sbursement or Ol	bligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category/ Type  004	05	13	2016
	Name of Federal Candidate Support C	Office Sought:	House D	District:
	DONALD J TRUMP Oppose	X President	Senate	State:
	Odiolidai Icai lo Bato	Disbursement For 2016 Other	: Primary (specify) ▶	X General
	(a) SUBTOTAL of Itemized Independent Expenditures	·	7-1-7-1	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	<b>-</b>	7	-
	(c) TOTAL Independent Expenditures	· [	7	
	Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.			
	Gihan Perera	M M / D	D / Y V	V V

[Electronically Filed]

2016

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	HEDULE E (FEC Form 3) MIZED INDEPENDENT EXPEND					PAGE 47	OF 78
_						1 -	4 OF FORM 3X
NA	ME OF COMMITTEE (In Full)				FEC II	DENTIFICATIO	N NUMBER ▼
FI	orida Freedom PAC					C00521013	
Che	eck if 24-hour report 48-hour r	report New re	eport Amends repo	ort filed on	M = M	/ D = D /	Y Y Y Y Y
	Full Name of Payee Fidel Pineda		🔀 Memo I	tem D	ate of Publi	c Distribution/I	Dissemination 2016
	Mailing Address 11960 Tuttle Blvd.			A	mount	20	2010
ŀ	City	State	Zip Code	— г			227.58
	Miami	FL	33184	-		<b>D : D450675</b> ursement or O	
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, I Report	Disc. on 5/6 48-hr	Category/ Type 004		05 05	13	2016
Ì	Name of Federal Candidate		Support	Office So	ought:	House [	District:
	DONALD J TRUMP		X Oppose		esident	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disburse 2016	ment For: Other (s	Primary pecify) ▶	X General
ı	Full Name of Payee		X Memo Ite	em D	ate of Publ	ic Distribution/	Dissemination
	Maria Aviles				04	28	2016
	Mailing Address 1510 E Mowry Drive Ap	t 203		A	mount		
ŀ	City	State	Zip Code				75.00
	Homestead	FL	33033			D: D450676 ursement or C	bligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, I Report	Disc. on 5/6 48-hr	Category/ Type 004		05 05	13	2016
ľ	Name of Federal Candidate		Support	Office S	ought:	House I	District:
	DONALD J TRUMP		X Oppose	X Pr	esident	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disburse 2016	ement For: Other (s	Primary pecify) ▶	General
(	(a) SUBTOTAL of Itemized Independent I	Expenditures				7	0.00
(	(b) SUBTOTAL of Unitemized Independen	nt Expenditures		·· •			
(	(c) TOTAL Independent Expenditures			·- •			
_	Under penalty of periury I certify that the	independent expenditure	es reported herein were	not made	in coopera	tion consultat	ion or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera	[Electronically Filed]	Date	07 /	15	/	2016
Signature						

T	EMIZED INDEPENDENT EXPENDITURES			PAGE 48 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC			C C00521013
Cł	heck if 24-hour report 48-hour report New rep	port Amends repo		M = M / D = D / Y = Y = Y
_	Full Name of Payee	X Memo Ite	em Date	of Public Distribution/Dissemination
	Julio Agredo			04 28 2016
	Mailing Address 1051 NW 2nd St Apt 7		Amou	unt
	City State	Zip Code	— L.	262.50
	Miami FL	33128-1156		action ID : D450677 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004		05 / 13 / 2016
	Name of Federal Candidate	Support	Office Sough	nt: House District:
	DONALD J TRUMP	Oppose	X Preside	
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursemen 2016	nt For:  Primary
	Full Name of Payee	🕱 Memo Ite	Date	of Public Distribution/Dissemination
	Audrey Hansack			04
	Mailing Address 5712 NW 3 Ave		Amou	unt
	City State	7:n Codo		75.00
	City State Miami FL	Zip Code 33127		action ID : D450678 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004		05 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sough	ht: House District:
	DONALD J TRUMP	Oppose	X Presid	dent Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursemer 2016	nt For:
			-	
	(a) SUBTOTAL of Itemized Independent Expenditures		. •	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures			
	(c) TOTAL Independent Expenditures		. •	7 7 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
	Gihan Perera [Electron	nically Filed]	07 /	15 2016
	Signature	Date	, 0,	2010

TEMIZED INDEPENDENT EXPENDITURES	PAGE 49 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee   Memo Item	Date of Public Distribution/Dissemination
Krizia Barker	04
Mailing Address 7540 Adventure Ave	Amount
Chata Zin Code	229.00
City State Zip Code  North Bay Village FL 33141	228.00 Transaction ID - D450680
Tion 24, Tinage	Transaction ID : D450680  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category/ Type 004	05 DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	ce Sought: House District:
DONALD J TRUMP	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  36278.90  Disb 2016	oursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Amalia Zavala	MTM / DTD / YTYTY
Mailing Address	04 28 2016
6600 SW 42fid Tel	Amount
City State Zip Code	112.50
Miami FL 33165-5324	Transaction ID : D450682  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category/ Type  004	05 13 2016
Name of Federal Candidate Support Office	ce Sought: House District:
DONALD LIBUMD	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  36278.90  Disc 2010	
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Gihan Perera [Electronically Filed]	07 15 2016

TEMIZED INDEPENDENT EXPENDITURES	PAGE 50 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report A	Amends report filed on////
Full Name of Payee	✓ Memo Item
Gloria Lopez	04
Mailing Address 701 NW 111th Ct	
Apt 2	Amount
City State Zip Code	e 375.00
Miami FL 33172-378	783 Transaction ID: D450683  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category Type	ry/ 004
Name of Federal Candidate	Support Office Sought: House District:
DONALD J TRUMP	Oppose President Senate State:
Calendar Year-To-Date	Disbursement For: Primary X General
Per Election for Office Sought 36278.9	
	Memo Item     Date of Public Distribution/Dissemination
Lilian Ramirez	M M / D D / Y Y Y Y
Mailing Address 8801 W Flagler St	04 28 2016
Apt 404	Amount
City State Zip Code	e 412.50
Miami FL 33174-24	Transaction ID : D450685  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category Type	
Name of Federal Candidate	Support Office Sought: House District:
DONALD J TRUMP	Oppose Senate State:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought 36278.9	.90
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	
Gihan Perera [Electronically Filed]	dl - 07 15 2016
Signature	Date 07 15 2016

## SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 51 FOR LINE 24	OF 78 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION	NUMBER ▼
Florida Freedom PAC				C C00521013	
Check if 24-hour report 48-hour report	New rep	port Amends repo		1 = M / D = D /	Y
Full Name of Payee		<b>⋈</b> Memo I	tem Date	of Public Distribution/D	issemination
Michelle Davis			T.	04	2016
Mailing Address 9603 NW 9th Ave			Amou		
City	State	Zip Code	— I I .		150.00
Miami	FL	33150-1811		action ID : D450687 of Disbursement or Ob	
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	48-hr	Category/ Type 004		05 / 13	2016
Name of Federal Candidate		Support	Office Sough	nt: House D	istrict:
DONALD J TRUMP		X Oppose	X Preside		State:
Calandar Vaar Ta Data			Disbursemen		General
Calendar Year-To-Date Per Election for Office Sought	7	36278.90	2016	Other (specify)	Z Gorioiai
Full Name of Payee Renette Jean Louis  Mailing Address 9603 NW 9th Ave  City Miami	State FL	☑ Memo Ite	Amou	action ID : D450688	225.00
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	48-hr	Category/ Type 004		of Disbursement or Ob 05 / 13	2016
Name of Federal Candidate		Support	Office Sough	ht: House D	istrict:
DONALD J TRUMP		Oppose	X Presid	lent Senate	State:
Calendar Year-To-Date Per Election for Office Sought	7 7	36278.90	Disbursemer 2016	nt For: Primary  Other (specify) ▶	General
(a) SUBTOTAL of Itemized Independent Expenditure  (b) SUBTOTAL of Unitemized Independent Expendit				171171	0.00
(c) TOTAL Independent Expenditures			· •	7 7	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized				
Gihan Perera	[Electron	nically Filed] Date	e 07 /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	′ - Y
Cignotius					

## SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 52 FOR LINE 24 C	OF 78
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION	
Florida Freedom PAC				C C00521013	NOWBER 4
Check if 24-hour report 48-hour report	New repor	rt Amends repo		" M / D " D / Y	- Y - Y - Y
Full Name of Payee		✓ Memo Ite	em Date o	of Public Distribution/Dis	semination
Alina Chavez			М	04 / 28 / Y	2016
Mailing Address 195 Grand Canal Drive			Amour	النال	2010
City		Zip Code	عطل ا		225.00
Miami	FL ;	33144		<b>ction ID : D450689</b> of Disbursement or Oblig	gation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	48-hr	Category/ Type 004	М		2016
Name of Federal Candidate		Support	Office Sought	t: House Dist	 trict:
DONALD J TRUMP		X Oppose	X Preside		tate:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement	t For: Primary	X General
	7 7			ther (specify) ▶	
Full Name of Payee Raul Vino		🗷 Memo Ite	Date of	of Public Distribution/Dis	semination 2016
Mailing Address 3586 NW 41st St				النالن	2010
Lot D406			Amou	nt	
City	State 2	Zip Code			412.50
Miami		33142-4349		ction ID : D450690 of Disbursement or Obliq	gation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	48-hr	Category/ Type 004		05 / 13 / Y	2016
Name of Federal Candidate		Support	Office Sough	nt: House Dis	trict:
DONALD J TRUMP		Oppose	X Preside		tate:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursemen 2016		General
(a) SUBTOTAL of Itemized Independent Expenditure:	S			(65211)	0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ures				
(c) TOTAL Independent Expenditures			· [	7 7	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized of				
Gihan Perera	[Electronic	eally Filed]	M M /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Y

TE	EMIZED INDEPENDENT EXPENDITURES			PAGE 53 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC			C C00521013
Ch	heck if 24-hour report 48-hour report New rep	port Amends repo		M = M / D = D / Y = Y = Y
	Full Name of Payee	X Memo Ite	em Date	of Public Distribution/Dissemination
	Georgina Musa			04 28 2016
	Mailing Address 3803 SW 82nd Ave Apt 9		Amou	unt
	City State	Zip Code		225.00
	Miami FL	33155-6710		action ID : D450692 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004		05 13 2016
	Name of Federal Candidate	Support	Office Sough	ht: House District:
	DONALD J TRUMP	Oppose	X Presid	
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursemer 2016	nt For:  Primary
	Full Name of Payee Nina Villalonga	🗷 Memo Ite	Date	of Public Distribution/Dissemination
	Mailing Address 15285 SW 107th Ln		Amou	
	Apt 201			150.00
	City State Miami FL	Zip Code 33196-4543		action ID : D450693 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004		05 / 13 / 2016
	Name of Federal Candidate	Support	Office Sough	ht: House District:
	DONALD J TRUMP	X Oppose	X Presid	
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursemen 2016	nt For: Primary X General  Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		. •	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		· •	
	(c) TOTAL Independent Expenditures		·· •	7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
	Gihan Perera [Electron	nically Filed] Date	07 /	15 2016
	Signature	_ Date	, 0,	2010

# S

Gihan Perera

Signature

	CHEDULE E (FEC Form				
ΓE	EMIZED INDEPENDENT EXPE	ENDITURES			PAGE 54 OF 78 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)			-	EC IDENTIFICATION NUMBER ▼
	Florida Freedom PAC				
					C00521013
Ch	neck if 24-hour report 48-h	our report New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
	Full Name of Payee Yanet Mendez		🔀 Memo It	em Date of F	
	Mailing Address 5300 W 21st Ct			04 Amount	28 2016
	Apt 212			Amount	<del> </del>
	City	State	Zip Code		187.50
	Hialeah	FL	33016-2016		on ID: D450695 Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 4/28-5 Report	5/4, Disc. on 5/6 48-hr	Category/ Type 004	M 05	
	Name of Federal Candidate		Support	Office Sought:	House District:
	DONALD J TRUMP		X Oppose	X President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement F 2016 Othe	or: Primary X General
	Full Name of Payee Gloria Restrepo  Mailing Address 490 NE 2nd Ave A		<b>⊠</b> Memo Ite	Date of I	
				Amount	470.50
	City	State	Zip Code	Transacti	172.50 on ID : D450697
	Miami	FL	33132		Disbursement or Obligation
	Purpose of Expenditure Payment for Financial Mgmt. Serv. o 5/4, Disc. on 5/6 48-hr Report	f Canvassing Prog. 4/28-	Category/ Type 004	05	
	Name of Federal Candidate		Support	Office Sought:	House District:
	DONALD J TRUMP		X Oppose	X President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement F 2016 Othe	for: Primary General or (specify) ▶
	(a) SUBTOTAL of Itemized Independ	ent Expenditures		·	0.00
	(b) SUBTOTAL of Unitemized Independent	endent Expenditures		· •	7
	(c) TOTAL Independent Expenditures	i		<b>•</b>	7 1 7 1 1 7
	Under penalty of perjury I certify that with, or at the request or suggestion party committee) any political party or	of, any candidate or authorized			

[Electronically Filed]

2016

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ITEMIZED INDEPENDEN	•		PAGE 55 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Fu	11)		<b>_</b>
Florida Freedom PA	•		C C00521013
Check if 24-hour report	48-hour report New re	port Amends report	filed on Man / Dad / Yayayay
Full Name of Payee		ズ Memo Item	Date of Public Distribution/Dissemination
Sophya Cano			04 28 2016
Mailing Address 11763 SV	V 14th St		Amount
City	State	Zip Code	225.00
Miami	FL	33184-2511	Transaction ID : D450699  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Services	erv. 4/28-5/4, Disc. on 5/6 48-hr	Category/ Type 004	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Э	Support	Office Sought: House District:
DONALD J TRUMP		X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office			Disbursement For: ☐ Primary ☐ General  Other (specify) ►
Full Name of Payee Dixiana Duron Gor  Mailing Address 101 SW 6		<b>⊠</b> Memo Item	Date of Public Distribution/Dissemination  M 04 / 28 / 2016  Amount
011			45000
City Miami	State FL	Zip Code 33144-2917	150.00  Transaction ID : D450701  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing S Report	erv. 4/28-5/4, Disc. on 5/6 48-hr	Category/ Type 004	05 13 2016
Name of Federal Candidat	e	Support	Office Sought: House District:
DONALD J TRUMP		X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office			Disbursement For: Primary
(a) SUBTOTAL of Itemized	Independent Expenditures		0.00
(b) SUBTOTAL of Unitemize	ed Independent Expenditures		·
(c) TOTAL Independent Exp	penditures		
with, or at the request or su			ot made in cooperation, consultation, or concert either, or (if the reporting entity is not a political
Gihan Perera	[Electro	onically Filed] Date	07 15 / Y = Y = Y = Y

FOR L		ORM 3X BER ▼	
PAGE	OF	78	

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC		C C00521013
Check if 24-hour report 48-hour report New r	eport Amends report	filed on Man / Dad / Yayayay
Full Name of Payee	🔀 Memo Iter	m Date of Public Distribution/Dissemination
Beatrice Alvarez		04
Mailing Address 8887 SW 27th St		Amount
City State	Zip Code	187.50
Miami FL	33165-3203	Transaction ID : D450703  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / 13 / 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2016 Other (specify) ▶
Full Name of Payee	X Memo Item	
Magaly Licona		04 28 2016
Mailing Address 15270 SW 104th St		Amount
Apt 1-19	7in Code	337.50
City State Miami FL	Zip Code 33196-3205	Transaction ID : D450705
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004	Date of Disbursement or Obligation  M 05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>
(c) TOTAL Independent Expenditures		<b>•</b>
Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
Gihan Perera [Electr	conically Filed] Date	07 15 2016
Signature	Date	

## SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES			L	PAGE 57 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				ENTIFICATION NUMBER ▼
Florida Freedom PAC				C00521013
Check if 24-hour report 48-hour report	New report	t Amends repor	t filed on /	D = D / Y = Y = Y
Full Name of Payee Patrick Villalonga		🔀 Memo Ite	m Date of Public	Distribution/Dissemination
Mailing Address 15285 SW 107th Ln			04	28 2016
Apt 201			Amount	
City	State Zi	ip Code		150.00
Miami		33196-4543	Transaction ID  Date of Disbur	: D450707 rement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 4 Report	48-hr	Category/ Type 004	05	13 / 2016
Name of Federal Candidate	·	Support	Office Sought:	House District:
DONALD J TRUMP		X Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursement For: 2016 Other (spe	Primary ☐ General
Full Name of Payee Piery-Ann Guzman  Mailing Address 13803 SW 114th Ter		<b>⊠</b> Memo Itei	M M M / O4 /	Distribution/Dissemination  28 2016
City	State Z	Zip Code		37.50
Miami		33186-9078	Transaction ID  Date of Disbut	
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 Report	48-hr	Category/ Type 004	M M / 05	13 / 2016
Name of Federal Candidate		Support	Office Sought:	House District:
DONALD J TRUMP		Oppose	> President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	, , , , , , , , , , , , , , , , , , ,	36278.90	Disbursement For: 2016 Other (spe	Primary ☐ General
(a) SUBTOTAL of Itemized Independent Expenditures	S		<b>•</b>	0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		<b>)</b>	
(c) TOTAL Independent Expenditures			<b>&gt;</b>	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized co			
Gihan Perera	[Electronica	ıllv Filedl	M / D D	/ Y = Y = Y = Y = Y = 2016

	CHEDULE E (FEC Form 3) EMIZED INDEPENDENT EXPEND					PAGE 58	OF 78 OF FORM 3X
NI.	AME OF COMMITTEE (In Full)						
	Florida Freedom PAC				FEC I	DENTIFICATIO	N NUMBER ▼
_	ionaa i reedoni i 700				C	C00521013	
CI	neck if 24-hour report 48-hour	report New report	ort Amends repo	ort filed o	on M M	/ D D /	Y Y Y Y Y
	Full Name of Payee Steve Luis		🔀 Memo It	em		ic Distribution/D	
					04	28	2016
	Mailing Address 2341 SW 11 Street				Amount		
	City	State	Zip Code				53.84
	Miami	FL	33135		ransaction I Date of Disb	<b>D : D450710</b> ursement or Ob	
	Purpose of Expenditure Payment for Fncl. Mgmt. Serv. of Canvas Disc. on 5/6 48-hr Report	sing Prog. 4/28-5/4,	Category/ Type 004		05	13	2016
	Name of Federal Candidate		Support	Office	Sought:	House D	istrict:
	DONALD J TRUMP		X Oppose		President [	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbure 2016	sement For: Other (s	Primary pecify) ▶	X General
	Full Name of Payee		X Memo Ite	em	Date of Publ	lic Distribution/D	)issemination
	David McDougal		_		M M M 04	/ 28 /	2016
	Mailing Address 4231 NW 11th PI				Amount		
	City	State	Zip Code				961.52
	Miami	FL	33127-2710	1	Transaction I	D: D450712 oursement or Ol	oligation
	Purpose of Expenditure Payment for Field Director Serv. 4/28-5/1 Report	5, Disc. on 5/6 48-hr	Category/ Type 004		05	13	2016
	Name of Federal Candidate		Support	Office	Sought:	House D	District:
	DONALD J TRUMP		X Oppose		President	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbur 2016	sement For: Other (s	Primary pecify) ▶	X General
	(a) SUBTOTAL of Itemized Independent I	Expenditures		▶		7	0.00
	(b) SUBTOTAL of Unitemized Independen	nt Expenditures		·· •		7	
	(c) TOTAL Independent Expenditures			▶		7	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	iny candidate or authorized					
	Gihan Perera			M	M / D = D	/ Y Y	Y

[Electronically Filed]

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TEMIZED INDEPENDENT EXPENDITURES	PAGE 59 OF 78 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)		
Florida Freedom PAC	C C00521013	
Check if 24-hour report 48-hour report New report Amends report filed on	M / D D / Y T Y T Y	
Victricia Chandler	Public Distribution/Dissemination	
Mailing Address 20130 SW 104th Ct Amount	28 2016	
	39.67	
Purpose of Expenditure Payment for Operations Dir. Serv. 4/28-5/15, Disc. on 5/6 48-hr Report  Category/ Type 004		
Name of Federal Candidate Support Office Sought:	House District:	
DONALD J TRUMP		
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016  Othe	For: Primary X General er (specify) ▶	
Daniel Garcia	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 2514 NW 94th Ave Amount		
City State Zip Code	769.20	
Date of	ion ID : D450716 Disbursement or Obligation	
Purpose of Expenditure Payment for Quality Control Coord. Serv. 4/28-5/4, Disc. on 5/6 48-Hr Report  Category/ Type 004 0		
Name of Federal Candidate Support Office Sought:	House District:	
DONALD J TRUMP		
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016 Oth	For: Primary X General er (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	7	
(c) TOTAL Independent Expenditures	7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cocwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.		
Gihan Perera [Electronically Filed] Date 07	15 / 2016	

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CHEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDITURES					
		PAGE	60	OF	78
		FOR LI	NE 24	OF FC	DRM 3X
ME OF COMMITTEE (In Full)	FEC ID	ENTIFIC	CATIO	N NUM	BER ▼
lorida Francisco DAC	_			_	•

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Florida Freedom PAC  C 000521013					
Check if 24-hour report 48-hour report New report	ort Amends repo	ort filed on			
Full Name of Payee	🔀 Memo It	em Date of Public Distribution/Dissemination			
Giovanny Navarro		04 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 8410 SW 150th Ave		Amount			
Apt 104 City State	Zip Code	807.68			
Miami FL	33193-1419	Transaction ID : D450718  Date of Disbursement or Obligation			
Purpose of Expenditure Payment for Campaign Mgmt. Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004	05			
Name of Federal Candidate	Support	Office Sought: House District:			
DONALD J TRUMP	X Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: Primary ☐ General 2016 Other (specify) ▶			
Full Name of Payee	🔀 Memo Ite				
Frank Bigus		04 28 2016			
Mailing Address 9674 NW 10th Ave		Amount			
Lot H812 City State	Zip Code	75.00			
Miami FL	33150-1839	Transaction ID : D455048  Date of Disbursement or Obligation			
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / 13 / 2016			
Name of Federal Candidate	Support	Office Sought: House District:			
DONALD J TRUMP	X Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: Primary General 2016			
The second secon		Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures		<b>•</b>			
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
Gihan Perera [Electroni	ically Filed]	07 15 2016			
Signature	Date	07 15 2016			

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SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES	PAGE 61 OF 78
	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼
FIORIDA FIEGUORI FAO	C C00521013
Check if 24-hour report 48-hour report New report Amends report file	ed on M M / D D / Y Y Y Y Y
Full Name of Payee  Dariena Ortega Penalva  Memo Item	Date of Public Distribution/Dissemination  M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 195 Grand Canal Dr	Amount 28 2016
City State Zip Code	75.00
Miami FL 33144-2527	Transaction ID : D455064
Purpose of Expenditure Payment for Canvassing Serv. 4/28-5/4, Disc. on 5/6 48-hr Report  Category/ Type 004	Date of Disbursement or Obligation  05  13  2016
Name of Federal Candidate Support Offi	ice Sought: House District:
DONALD J TRUMP Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dis 201	bursement For: Primary General  Other (specify)
Full Name of Payee  Laura Pierre  Memo Item	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2300 S Park Road Apt 12	Amount
City State Zip Code	75.00
Hallandale FL 33009	Transaction ID : D455065  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 4/20-4/27, Disc. on 4/23 48-hr Report  Category/ Type  004	05 / 13 / 2016
Name of Federal Candidate Support Off	ice Sought: House District:
DONALD J TRUMP Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dis 201	Subursement For: Primary General  Other (specify)   General
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Gihan Perera	W M / D D / Y Y Y

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Gihan Perera

Signature

SCHEDULE E	(FEC Form 3X)	)			
TEMIZED INDEPE	NDENT EXPENDIT	TURES			PAGE 62 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTE	E (In Full)				FEC IDENTIFICATION NUMBER ▼
Florida Freedor	n PAC				C C00521013
Check if 24-hour r	eport 48-hour rep	port New rep	port Amends repo	ort filed	I on Mam / Dad / Yayayay
Full Name of Payer			🔀 Memo It	tem	Date of Public Distribution/Dissemination
Humberto Igles	sias				05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8	181 NW South River Driv	ve Apt. A14			Amount
City		State	Zip Code		279.00
Medley		FL	33166		Transaction ID : D450090 Date of Disbursement or Obligation
Purpose of Expend Payment for Canva Report	liture assing Serv. 5/5-5/15, Dis	sc. on 5/6 48-hr	Category/ Type 004		05 / D D / Y Y Y Y Y Y 2016
Name of Federal C	Candidate		Support	Office	e Sought: House District:
DONALD J TRUMF	)		X Oppose		President Senate State:
Calendar Year Per Election fo	-To-Date or Office Sought		36278.90	Disbu 2016	ursement For: Primary X General  Other (specify) ▶
Full Name of Paye Zulema Cam  Mailing Address		•	X Memo Ite	em	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
'	00 3W 63 Way Api. 102				Amount
City		State	Zip Code		225.00
Pembroke Pines	Phone	FL	33025		Transaction ID : D450639  Date of Disbursement or Obligation
Purpose of Expend Payment for Canva Report	assing Serv. 5/5-5/15, Dis	sc. on 5/6 48-hr	Category/ Type 004		05 / 27 / 2016
Name of Federal C	Candidate		Support	Offic	e Sought: House District:
DONALD J TRUMI	<b>O</b>		X Oppose	X	President Senate State:
Calendar Year Per Election fo	-To-Date or Office Sought		36278.90	Disb 2016	ursement For: Primary
(b) SUBTOTAL of U	temized Independent Ex  Unitemized Independent  dent Expenditures	Expenditures		·· •	0.00
Under penalty of pe	rjury I certify that the ir	ndependent expenditures	s reported herein were	not m	ade in cooperation, consultation, or concert er, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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	HEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDITUR	ES			PAGE 63 OF 78 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
F	lorida Freedom PAC				C C00521013
Ch	eck if 24-hour report 48-hour report	New rep	port Amends rep	ort filed	on M = M / D = D / Y = Y = Y
П	Full Name of Payee		<b>X</b> Memo I	Item	Date of Public Distribution/Dissemination
	Miladis Diaz				05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 9 E 4th St				Amount
	Apt 102				Amount
	City	State	Zip Code		263.92
	Hialeah	FL	33010-6258		Transaction ID : D450645  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. or Report	n 5/6 48-hr	Category/ Type 004		05 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office	Sought: House District:
	DONALD J TRUMP		Oppose		President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	-,,	36278.90	Disbu 2016	rrsement For:  Primary
	Full Name of Payee Pedro Gonzalez		🗷 Memo It	em	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 915 NW 1st Ave Apt H2512				Amount
	City	State	Zip Code		112.50
	Miami	FL	33136-3560		Transaction ID : D450647  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. or Report	า 5/6 48-hr	Category/ Type 004		05 / 27 / 2016
	Name of Federal Candidate		Support	Office	e Sought: House District:
	DONALD J TRUMP		X Oppose	X	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbu 2016	ursement For:
	(a) SUBTOTAL of Itemized Independent Expend (b) SUBTOTAL of Unitemized Independent Expe				0.00
	(c) TOTAL Independent Expenditures			··· <b>•</b>	
١	Under penalty of perjury I certify that the independent, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorize			
	Gihan Perera	[Electron	nically Filed]	M 0	7 15 2016
	O'maratama	£	Dat	e 0	2010

## SCHEDULE E (FEC Form 3X)

CHEDOLE L (FLC FOIII 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 64 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	
Florida Freedom PAC	EC IDENTIFICATION NUMBER ▼
	C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
	Public Distribution/Dissemination
Jose Miguel Gonzalez Ortiz	
Mailing Address 1321 NW 42 Street Rear Amount	
Older Tip Code	440.50
City State Zip Code	112.50
	on ID: D450649 Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type 004 05	M / D D / Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP  DONALD J TRUMP  DOPPose  President	
Calendar Year-To-Date Per Election for Office Sought  Disbursement For 2016  Othe	for: Primary X General  er (specify) ▶
	Public Distribution/Dissemination
Alicia Alzuri	M / D D / Y Y Y Y
Mailing Address 0214 SW 147 Ct	5 05 2016
9214 SW 147 Ct. Amount	
City State Zip Code	319.38
Midifi	on ÍD : D450653 Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type 004 05	M / D D / Y Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP  DONALD J TRUMP  DOPpose  President	
Per Election for Office Sought 36278.90 2016	er (specify) •
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	
(b) Forne mospondom Exponditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coop with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 65 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	
Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼  C C00521013
Check if 24-hour report 48-hour report New report Amends report filed or	M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Viky Lara	05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11960 Tuttle Blvd.	Amount
City State Zip Code	112.50
	ansaction ID : D450656 Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type 004	05 / D D / Y Y Y Y Y Y 2016
Name of Federal Candidate Support Office S	ought: House District:
DONALD LITPLIAD	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburse 2016	ement For:
Jorge Macias	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7080 NW 174 Terrace Apt. 104	Amount
City State Zip Code	112.50
Milanni	ransaction ID: D450658 Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type  004	05 / 27 / 2016
Name of Federal Candidate Support Office S	Sought: House District:
DONALD J TRUMP	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburse 2016	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Gihan Perera [Electronically Filed] Date 07	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

PAGE	66	OF	78	_	
FOR L	INE 24	OF F	ORM 3X		
ENTIFICATION NUMBER W					

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC		C C00521013
Check if 24-hour report 48-hour report New report	Amends report f	iled on
Full Name of Payee	🔀 Memo Item	Date of Public Distribution/Dissemination
Julio Cesar Maldonado Rodriguez		05 D D D Z016
Mailing Address 7757 SW 86 Street Apt. C111		Amount
City State Zi	p Code	287.92
	3143	Transaction ID : D450660  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support O	ffice Sought: House District:
DONALD J TRUMP		President Senate State:
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary
	<b>★</b> Memo Item	
Full Name of Payee Maria Patricia Medina	Memoritem	Date of Public Distribution/Dissemination  05  05  05  05
Mailing Address 3700 NW 62 Ave. Apt. 207		Amount
City State Zi	ip Code	112.50
	3166	Transaction ID : D450662  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / 27 / 2016
Name of Federal Candidate	Support C	office Sought: House District:
DONALD J TRUMP	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		isbursement For:  Primary  General O16 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	······································	0.00
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.		
Gihan Perera [Electronica	lly Filed] Date	07 15 2016
Signature	24.0	

TEMIZED INDEPENDENT EXPENDITURES	PAGE 67 OF 78
	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
	ate of Public Distribution/Dissemination
Xaviera Ramos	05 05 2016
Mailing Address 2406 San Remo Circle An	mount
City State Zip Code	322.19
Homestead FL 33035 Trai	nsaction ID : D450664 ate of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type 004	05 / 27 / Y 2016
Name of Federal Candidate Support Office So	ought: House District:
DONALD J TRUMP    Donald J Trump   Capport   C	
Calendar Year-To-Date Per Election for Office Sought  Disburser 2016	ment For:
Henrietta Ricketts	ate of Public Distribution/Dissemination
Mailing Address 10601 NW 17 Ave Apt 102  Ar	mount
City State Zip Code	53.23
· = 00 · · ·	ansaction ID: D450666 ate of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type  004	05 / 27 / 2016
Name of Federal Candidate Support Office So	ought: House District:
DONALD J TRUMP	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburser 2016	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Gihan Perera  [Electronically Filed] Date 07	15 2016

TE	EMIZED INDEPENDENT EXPENDITURES			PAGE 68 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC			C C00521013
Ch	heck if 24-hour report 48-hour report New rep	port Amends repo		" M / D " D / Y " Y " Y " Y
	Full Name of Payee	✓ Memo Ite	em Date	of Public Distribution/Dissemination
	Juanita Romera			05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 114 NE 83 Street		Amou	nt
	City State	Zip Code	— IL.	112.50
	Miami FL	33138		ction ID: D450668 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report	Category/ Type 004		05 / 27 / 2016
	Name of Federal Candidate	Support	Office Sough	it: House District:
	DONALD J TRUMP	X Oppose	X Preside	
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursemen 2016 O	t For: Primary X General ther (specify) ▶
	Full Name of Payee	🗶 Memo Ite	em Date	of Public Distribution/Dissemination
	Ivan Zuleta		T.	/ I M / D D / Y Y Y Y
	Mailing Address		— L	05 05 2016
	3501 W 11 Avenue Apt. 113		Amou	int
	City State	Zip Code		114.73
	Hialeah FL	33012		oction ID: D450670 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report	Category/ Type 004		05 / 27 / 2016
	Name of Federal Candidate	Support	Office Sough	nt: House District:
	DONALD J TRUMP	X Oppose	X Preside	ent Senate State:
	Calendar Year-To-Date	111111111	Disbursemen	nt For: Primary X General
	Per Election for Office Sought	36278.90	2016 C	Other (specify)
_				(-1)
	(a) SUBTOTAL of Itemized Independent Expenditures		. •	0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures			
	(2) 33316		•	
	(c) TOTAL Independent Expenditures		· •	7 1 7 1 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			
	Gihan Perera [Electron	onically Filed] Date	M M /	15 / Y Y Y Y Y Y Y Y
	Signature	Date	,	

NAME OF COMMITTEE (In Full) Florida Freedom PAC

Full Name of Payee

Purpose of Expenditure

DONALD J TRUMP

Full Name of Payee Krizia Barker

Mailing Address

North Bay Village

DONALD J TRUMP

Signature

Purpose of Expenditure

Name of Federal Candidate

Calendar Year-To-Date

Per Election for Office Sought

City

Report

Name of Federal Candidate

Calendar Year-To-Date

Per Election for Office Sought

Ysis Perez

Mailing Address

Check if

City

Hialeah

24-hour report

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

20020 NW 64 Court

Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr

7540 Adventure Ave

Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr

(a) SUBTOTAL of Itemized Independent Expenditures.....

(b) SUBTOTAL of Unitemized Independent Expenditures .....

48-hour report

New report

Zip Code

Category/

36278.90

Zip Code

Category/

Type

36278.90

33141

Type

33015

State

FL

State

FL

	PAGE 69 OF 78 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00521013
Amends report	filed on Man / Dab / Yayayay
▼ Memo Iten	Date of Public Distribution/Dissemination
	05 / 05 / 2016
	Amount
е	266.15  Transaction ID : D450672  Date of Disbursement or Obligation
ry/ pe 004	05 / 27 / 2016
Oppose	Office Sought: House District:  Note: President Senate State:  Disbursement For: Primary General Color Other (opening)
★ Memo Item	Other (specify) ▶  Date of Public Distribution/Dissemination
	05 05 / 2016
	Amount
e	187.50
	Transaction ID : D450681  Date of Disbursement or Obligation
ry/ pe 004	05 27 2016
Support	Office Sought: House District:
Oppose	President Senate State:
	Disbursement For:  Primary
<u> </u>	
	0.00
	•

(c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gihan Perera [Electronically Filed] 15 2016 Date

## SCHEDULE E (FEC Form 3X)

CHEDOLL L (F								
TEMIZED INDEPENI	DENT EXPENDITURES						PAGE 70	OF 78 24 OF FORM 3X
NAME OF COMMITTEE (	În Full)					FEC I		ION NUMBER ▼
Florida Freedom								ION NOWDELL 4
						C	C00521013	
Check if 24-hour repo	ort 48-hour report	New rep	ort Ame	ends repoi	rt filed or	n M M	/ D = D	Y
Full Name of Payee			×	Memo Ite	em [	Date of Publ	ic Distributio	n/Dissemination
Gloria Lopez						M M M 05	/ D D D 05	2016
Mailing Address 701	NW 111th Ct						90	20.0
Apt					<i>F</i>	Amount		
City		State	Zip Code					225.00
Miami		FL	33172-3783				D: D450684 ursement or	Obligation
Purpose of Expenditure Payment for Canyassi	re ing Serv. 5/5-5/15, Disc. on 5/6 4	48-hr	Category/	004	<b>7</b>	M M M 05	/ D D D 27	/ Y Y Y Y Y Y Z Y Z 2016
Report			Туре					2010
Name of Federal Can	didate		Sı	upport	Office S	Sought:	House	District:
DONALD J TRUMP			X o	ppose	XP	President	Senate	State:
Calendar Year-To	-Date					ement For:	Prima	ry X General
Per Election for (			36278.90		2016	Other (s	pecify) ►	
Full Name of Payee			×	Memo Iter	m j			n/Dissemination
Lilian Ramirez						M = M	/ D D	/ Y = Y = Y
Mailing Address	A M. Flandson O4					05	05	2016
000	1 W Flagler St				/	Amount		
City	404	State	Zip Code					225.00
Miami		FL	33174-2424				D : D450686	
Purpose of Expenditu	re		Τ ,				oursement or	•
	ing Serv. 5/5-5/15, Disc. on 5/6	48-hr	Category/ Type	004	_	05	27	2016
Name of Federal Can	didate		S	upport	Office S	Sought:	House	District:
DONALD J TRUMP			Xo	)ppose	X F	President	Senate	State:
Calendar Year-To	-Date					sement For:	Prima	ry X General
Per Election for		, , ,	36278.90		2016	Other (s	specify) ▶	
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(a) SUBTOTAL of Item	nized Independent Expenditures	3						0.00
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(b) SUBTOTAL of Unit	temized Independent Expenditu	res			• • [	-		
( ) TOTAL ladarandari	. =				r			
(c) IUIAL independer	nt Expenditures				•	-	7	
with, or at the request	ry I certify that the independen or suggestion of, any candidate olitical party committee or its a	e or authorized	•					·
Gihan Pere	era	[Electron	iically Filed]	Date	M M M	/ 15		)16
0:				Date	0.	, ,		

## 17

Gihan Perera

Signature

	CHEDULE E (FEC Form 3X)		
ľĿ	EMIZED INDEPENDENT EXPENDITURES		PAGE 71 OF 78 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
F	Florida Freedom PAC		C C00521013
Ch	heck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Raul Vino	🔀 Memo It	tem Date of Public Distribution/Dissemination
			05 05 7 2016
	Mailing Address 3586 NW 41st St		Amount
	Lot D406		
	City State	Zip Code	225.00
	Miami FL	33142-4349	Transaction ID : D450691  Date of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report	Category/ Type 004	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	X Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
	Full Name of Payee Nina Villalonga	X Memo Ite	Date of Public Distribution/Dissemination  05 / 05 / 2016
	Mailing Address 15285 SW 107th Ln		Amount
	Apt 201		
	City State Miami FL	Zip Code 33196-4543	37.50 Transaction ID : D450694
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report	Category/ Type 004	Date of Disbursement or Obligation  M
	Name of Federal Candidate	Support	Office Sought: House District:
	DONALD J TRUMP	Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For:  Primary  General   2016  Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		• 0.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		· · · · · · · · · · · · · · · · · · ·
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

2016

15

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### SCHE ITEMIZ

	TURES				PAGE 72	2 OF 78 24 OF FORM 3
E OF COMMITTEE (In Full)				550		
rida Freedom PAC				C	C00521013	TION NUMBER ▼
				M = M	/	/
k if 24-hour report 48-hour re	port New re	port Amends repo	rt filed on			
ull Name of Payee Yanet Mendez		🔀 Memo It	em Da	M = M	/ D D	n/Dissemination
Mailing Address 5300 W 21st Ct			Am	05 ount	05	2016
Apt 212						
City	State	Zip Code				112.50
lialeah	FL	33016-2016			ID: D450696 bursement or	
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Dis Report	sc. on 5/6 48-hr	Category/ Type 004		05	/ D D D 27	2016
lame of Federal Candidate		Support	Office Sou	ıght:	House	District:
DONALD J TRUMP		X Oppose	X Pres	sident	Senate	State:
Calendar Year-To-Date Per Election for Office Sought		36278.90	Disbursen 2016		Prima specify) ▶	ry X Genera
				Other (		
ull Name of Payee		<b>⋉</b> Memo Ite	m Da			on/Dissemination
Gloria Restrepo		<b>⊠</b> Memo Ite	m Da			
		<b>⊠</b> Memo Ite		te of Pul	blic Distributio	/ Y = Y = Y = Y
Gloria Restrepo	State			te of Pul	blic Distributio	/ Y = Y = Y = Y
Gloria Restrepo  Mailing Address 490 NE 2nd Ave Apt 1217  Dity  Miami			An	te of Pul M 05 nount	blic Distributio	2016 112.50
Gloria Restrepo  Mailing Address 490 NE 2nd Ave Apt 1212  City	State FL	Zip Code	An	te of Pul M 05 nount	blic Distribution    Description   Descripti	2016 112.50 3 Obligation
Gloria Restrepo  Mailing Address 490 NE 2nd Ave Apt 1217  Dity  Miami  Purpose of Expenditure  Payment for Canvassing Serv. 5/5-5/15, Di	State FL	Zip Code 33132 Category/	An	05 nount	D: D450698	2016  112.50  Cobligation
Gloria Restrepo  Mailing Address 490 NE 2nd Ave Apt 1212  City  Miami  Purpose of Expenditure  Payment for Canvassing Serv. 5/5-5/15, Directors	State FL	Zip Code 33132  Category/ Type 004	An Trai	nount  saction te of Dis  ught:	ID: D450698	2016  112.50  Cobligation  2016  District:  State:
Gloria Restrepo  Mailing Address 490 NE 2nd Ave Apt 1217  City  Miami  Purpose of Expenditure  Payment for Canvassing Serv. 5/5-5/15, Di  Report  Jame of Federal Candidate	State FL	Zip Code 33132  Category/ Type  O04  Support	An Tran Da	nount  nsaction  o  o  o  o  o  o  o  o  o  o  o  o	ID: D450698 sbursement or House Senate	2016  112.50  Cobligation  2016  District:  State:
Gloria Restrepo  Mailing Address  490 NE 2nd Ave Apt 1212  City  Miami  Purpose of Expenditure  Payment for Canvassing Serv. 5/5-5/15, Directors  Report  Jame of Federal Candidate  DONALD J TRUMP  Calendar Year-To-Date  Per Election for Office Sought	State FL sc. on 5/6 48-hr	Zip Code 33132  Category/ Type  Support  Oppose  36278.90	An Tran Da Office Son X Pre Disbursen 2016	nount  nsaction  o  o  o  o  o  o  o  o  o  o  o  o	ID: D450698 Subursement of House Senate Prima	2016  112.50  Cobligation  2016  District:  State:  Type General
Gloria Restrepo  Mailing Address 490 NE 2nd Ave Apt 1217  Dity  Miami  Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Di Report  Jame of Federal Candidate  DONALD J TRUMP  Calendar Year-To-Date	State FL sc. on 5/6 48-hr	Zip Code 33132  Category/ Type  Support  Oppose  36278.90	An Tran Da Office Son X Pre Disbursen 2016	nount  nsaction  o  o  o  o  o  o  o  o  o  o  o  o	ID: D450698 Subursement of House Senate Prima	2016  112.50  Cobligation  2016  District:  State:
Gloria Restrepo  Mailing Address  490 NE 2nd Ave Apt 1212  City  Miami  Purpose of Expenditure  Payment for Canvassing Serv. 5/5-5/15, Directors  Report  Jame of Federal Candidate  DONALD J TRUMP  Calendar Year-To-Date  Per Election for Office Sought	State FL sc. on 5/6 48-hr	Zip Code 33132  Category/ Type  Support  Oppose  36278.90	And Train Date of Date	nount  nsaction  o  o  o  o  o  o  o  o  o  o  o  o	ID: D450698 Subursement of House Senate Prima	2016  112.50  Cobligation  2016  District:  State:  Type General

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

[Electronically Filed]	Date	07	/	15	/	2016
	[Electronically Filed]	[Electronically Filed] Date	[Electronically Filed] Date 07	[Electronically Filed] Date 07	[Electronically Filed] Date 07 15	[Electronically Filed] Date 07 15

TEMIZED INDEPENDENT EXPENDITURES		PAGE 73 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Florida Freedom PAC		C C00521013
Check if 24-hour report 48-hour report	New report Amends repor	rt filed on
Full Name of Payee	X Memo Ite	Date of Public Distribution/Dissemination
Sophya Cano		05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11763 SW 14th St		Amount
City St	tate Zip Code	233.92
	FL 33184-2511	Transaction ID : D450700  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-Report	-hr Category/ Type 004	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	X Oppose	✓ President     Senate     State:
Colondor Voor To Data	(Z. X) 1 1	Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	36278.90	2016 Other (specify) ▶
Full Name of Payee Dixiana Duron Gonzalez	<b>⋈</b> Memo Iter	m Date of Public Distribution/Dissemination
		05 05 2016
Mailing Address 101 SW 67th Ct		Amount
City	tate Zip Code	112.50
Miami	FL 33144-2917	Transaction ID : D450702  Date of Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-Report	-hr Category/ Type 004	05 / 27 / 2016
Name of Federal Candidate	Support	Office Sought: House District:
DONALD J TRUMP	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	36278.90	Disbursement For: Primary General 2016
13. 2.00.00. 13. 0.000 2.220	7	Uther (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures		0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	s	•
		4
(c) TOTAL Independent Expenditures		<b>&gt;</b>
Under penalty of perjury I certify that the independent exists, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized committee or agent of	
Gihan Perera	[Electronically Filed] Date	07 15 2016
Signature	Bate	النتا لنا لنا

NAME OF COMMITTEE (In Full)

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 74 OF 78 FOR LINE 24 OF FORM 3X							
FEC IDENTIFICATION NUMBER ▼							
C C00521013							
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ate of Public Distribution/Dissemination							
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ate of Disbursement or Obligation							
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esident Senate State:							
ment For: Primary X General							
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ate of Public Distribution/Dissemination  M M M / 05 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
nount							
150.00 nsaction ID : D450706							
ate of Disbursement or Obligation							
05 27 2016							
ought: House District:							
esident Senate State:							
ment For: Primary X General							
Other (specify)							
0.00							
7 7 7							
7 1 7 1 7 1							
in according consultation or consult							

Florida Freedom PAC Check if 24-hour report 48-hour report New report Amends report filed on Full Name of Payee ✗ Memo Item Da **Beatrice Alvarez** Mailing Address 8887 SW 27th St An City State Zip Code Miami FL 33165-3203 Trai Da Purpose of Expenditure Category/ Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr 004 Type Name of Federal Candidate Office So Support DONALD J TRUMP Oppose Pre Disburser Calendar Year-To-Date 2016 36278.90 Per Election for Office Sought × Memo Item Full Name of Payee Da Magaly Licona Mailing Address 15270 SW 104th St Ar Apt 1-19 City State Zip Code Miami FL 33196-3205 Tra Da Purpose of Expenditure Category/ Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr 004 Type Report Name of Federal Candidate Office So Support DONALD J TRUMP Oppose X Pre Disburse Calendar Year-To-Date 36278.90 2016 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gihan Perera [Electronically Filed] 2016 15 Date Signature

PAGE 75 OF 78 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00521013
M = M / D = D / Y = Y = Y
te of Public Distribution/Dissemination
05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ount
75.00
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05 / 27 / 2016
ıght: House District:
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nent For: Primary X General
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05 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ught: House District:
sident Senate State:
nent For: Primary X General
Other (specify)
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NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼							
Florida Freedom PAC							
Check	if 24-hour report 48-hour report New report	ort Amends repo	rt filed	on M = M / D = D / Y = Y = Y			
	III Name of Payee	🔀 Memo Ite	em	Date of Public Distribution/Dissemination			
Ľ	Patrick Villalonga			05 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
М	ailing Address 15285 SW 107th Ln			Amount			
	Apt 201						
Ci		Zip Code		75.00			
	iami FL	33196-4543		Transaction ID : D450708  Date of Disbursement or Obligation			
P	urpose of Expenditure ayment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr eport	Category/ Type 004		05 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Na	ame of Federal Candidate	Support	Office	Sought: House District:			
D	ONALD J TRUMP	X Oppose	X	President Senate State:			
	Calendar Year-To-Date	00070 00	Disbu 2016	rsement For: Primary X General			
L	Per Election for Office Sought	36278.90		Other (specify) ▶			
	Il Name of Payee	<b>X</b> Memo Ite	m	Date of Public Distribution/Dissemination			
<u> </u>	Steve Luis			05			
М	ailing Address 2341 SW 11 Street			Amount			
C		Zip Code		74.03			
	Miami FL	33135		Transaction ID : D450711  Date of Disbursement or Obligation			
P	urpose of Expenditure layment for Fncl. Mgmt. Serv. of Canvassing Prog. 5/5-5/15, lisc. on 5/6 48-hr Report	Category/ Type 004		05 / 27 / 2016			
N	ame of Federal Candidate	Support	Office	Sought: House District:			
	ONALD J TRUMP	Oppose	X	President Senate State:			
	Calendar Year-To-Date	1000000		rsement For: Primary X General			
	Per Election for Office Sought	36278.90	2016	Other (specify) ►			
(a)	SUBTOTAL of Itemized Independent Expenditures		• •	0.00			
(b)	SUBTOTAL of Unitemized Independent Expenditures		•				
(c)	TOTAL Independent Expenditures		•	1 4 1 4 1 4			
with	der penalty of perjury I certify that the independent expenditures n, or at the request or suggestion of, any candidate or authorized ty committee) any political party committee or its agent.						
	Gihan Perera [Electroni	cally Filed]	M = 07				
-	Signature	Date	0.	2010			

## SCHEDULE E (FEC Form 3X)

TE	EMIZED INDEPENDENT EXPENDITURE	ES			PAGE 76 OF 78 FOR LINE 24 OF FORM 3X
N/	AME OF COMMITTEE (In Full)				
	Florida Freedom PAC			C	C IDENTIFICATION NUMBER ▼ C00521013
Ch	heck if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	/ D D / Y D Y D Y
	Full Name of Payee Daniel Garcia	,	🔀 Memo Ito	em Date of P	Public Distribution/Dissemination
	Daniel Galcia			05	05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2514 NW 94th Ave			Amount	
	City	State	Zip Code		384.60
	Coral Springs	FL	33065-4920	Transactio	on ID : D450717
	Purpose of Expenditure			Date of D	Disbursement or Obligation
	Payment for Quality Control Coord. Serv. 5/5-5/15 48-hr Report	5, Disc. on 5/6	Category/ Type 004	05	27 / 2016
	Name of Federal Candidate		Support	Office Sought:	House District:
	DONALD J TRUMP		X Oppose	President	Senate State:
	Calendar Year-To-Date			Disbursement Fo	or: Primary X General
	Per Election for Office Sought		36278.90	2016 Other	(specify)
	Full Name of Payee		🔀 Memo Ite		Public Distribution/Dissemination
	Giovanny Navarro			05	
	Mailing Address 8410 SW 150th Ave				00 2010
				Amount	
	Apt 104 City	State	Zip Code		403.84
	Miami	FL	33193-1419		on ID: D450719 Disbursement or Obligation
	Purpose of Expenditure Payment for Campaign Mgmt. Serv. 5/5-5/15, Dis hr Report	c. on 5/6 48-	Category/ Type 004	05	
	Name of Federal Candidate		Support	Office Sought:	House District:
	DONALD J TRUMP		Oppose	X President	Senate State:
	Calendar Year-To-Date			Disbursement Fo	or: Primary X General
	Per Election for Office Sought		36278.90	2016 Other	r (specify)
	(a) SUBTOTAL of Itemized Independent Expendit	tures		<b>•</b>	0.00
	(b) SUBTOTAL of Unitemized Independent Exper	nditures		· • [	4
	(c) TOTAL Independent Expenditures			<b>•</b>	7
	Under penalty of perjury I certify that the independent, or at the request or suggestion of, any cand party committee) any political party committee or in	didate or authorized			
	Gihan Perera			M M / D	D / Y Y Y Y
		[Electron	nically Filed]	07	2016

## SCHEDULE E (FEC Form 3X)

CHEDOLL L (FLC FOIII 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 77 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	
Florida Freedom PAC	EC IDENTIFICATION NUMBER ▼
Tionaa i recaem i 7.0	C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on	M / D D / Y B Y B Y B Y
	Public Distribution/Dissemination
Alina Chavez	M / D D / Y = Y = Y
Mailing Address 195 Grand Canal Drive Amount	
City State Zip Code	112.50
Date of	ion ID : D455054 Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type 004	
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP	
Calendar Year-To-Date Per Election for Office Sought  Disbursement F 2016 Oth	For: Primary ⊠ General er (specify) ▶
E Managhan	
Emilio Fonseca	
Mailing Address 10130 SW 154th Circle Ct	05 05 2016
Amount Apt 102	
City State Zip Code	112.50
Milanii	tion ID : D455057 Disbursement or Obligation
Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 48-hr Report  Category/ Type  004	)5 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
DONALD J TRUMP    Donald   Don	
Calendar Year-To-Date Per Election for Office Sought  Disbursement   2016   Oth	For: Primary X General er (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	4 1 4 1 4 1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in code with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Gihan Perera [Electronically Filed] Date 07	15 2016

TE	EMIZED INDEPENDENT EXPENDITURES	; 			PAGE 78 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)					FEC IDENTIFICATION NUMBER ▼
<b>-</b>	Florida Freedom PAC				C C00521013
Check if 24-hour report 48-hour report New report Amends report filed on					
	Full Name of Payee		🔀 Memo Ite	em Date	of Public Distribution/Dissemination
	Piery-Ann Guzman				05 / 2016
	Mailing Address 13803 SW 114th Ter			Amou	unt
	City	State	Zip Code	<b>□</b>  :	75.00
	Miami	FL	33186-9078		action ID: D455059 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 Report	6 48-hr	Category/ Type 004		05 27 2016
	Name of Federal Candidate		Support	Office Sough	ht: House District:
	DONALD J TRUMP		X Oppose	X Presid	
	Out and an Mark To Date			Disbursemer	
	Calendar Year-To-Date Per Election for Office Sought		36278.90	2016	Other (specify)
	Full Name of Payee		🗶 Memo Ite	m Date	of Public Distribution/Dissemination
	Georgina Musa				05 05 2016
	Mailing Address 3803 SW 82nd Ave			Amou	unt
	Apt 9	Ctoto	Zin Codo		187.50
	City Miami	State FL	Zip Code 33155-6710		action ID : D455062 of Disbursement or Obligation
	Purpose of Expenditure Payment for Canvassing Serv. 5/5-5/15, Disc. on 5/6 Report	'6 48-hr	Category/ Type 004		05 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sough	ht: House District:
	DONALD J TRUMP		X Oppose	X Presid	dent Senate State:
	Calendar Year-To-Date		( <u>v                                    </u>	Disbursemen	
	Per Election for Office Sought		36278.90	2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures			•	0.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Gihan Perera	[Electron	ically Filed] Date	, 07 /	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature		_		