

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Florida Freedom PAC

ADDRESS (number and street) 10800 Biscayne Blvd. Suite 1050 Check if different than previously reported. (ACC) Miami FL 33161

2. FEC IDENTIFICATION NUMBER C C00521013 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mercado, Andrea, , , Type or Print Name of Treasurer

Signature of Treasurer Mercado, Andrea, , , [Electronically Filed] Date 01 / 24 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Florida Freedom PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="130798.66"/>	<input type="text" value="130798.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="93542.43"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16280.00"/>	<input type="text" value="16280.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="109822.43"/>	<input type="text" value="147078.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10798.49"/>	<input type="text" value="48054.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="99023.94"/>	<input type="text" value="99023.94"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Florida Freedom PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16280.00	16280.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	16280.00	16280.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16280.00	16280.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	16280.00	16280.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	16280.00	16280.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10798.49	18054.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10798.49	18054.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	30000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10798.49	48054.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10798.49	48054.72

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16280.00	16280.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16280.00	16280.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10798.49	18054.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10798.49	18054.72

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
1199 SEIU Florida Political Committee

Mailing Address 2881 Corporate Way

City Miramar	State FL	Zip Code 33025
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16280.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2017

Transaction ID : C7043346

Amount of Each Receipt this Period
16280.00

Memo Item

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	16280.00
TOTAL This Period (last page this line number only).....▶	16280.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Freedom PAC

A. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 659754

City San Antonio State TX Zip Code 78265

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2017

FEC Identification Number: C

Transaction ID : D475533

Amount of Each Disbursement this Period: 95.00

Memo Item

B. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 659754

City San Antonio State TX Zip Code 78265

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : D475534

Amount of Each Disbursement this Period: 95.00

Memo Item

C. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 659754

City San Antonio State TX Zip Code 78265

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2017

FEC Identification Number: C

Transaction ID : D475535

Amount of Each Disbursement this Period: 95.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 285.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Chase Bank

Mailing Address P.O. Box 659754

City
San Antonio

State
TX

Zip Code
78265

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2017			

FEC Identification Number

C []

Transaction ID : D475536

Amount of Each Disbursement this Period

[] 95.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Bank

Mailing Address P.O. Box 659754

City
San Antonio

State
TX

Zip Code
78265

Purpose of Disbursement
Checking Supplies

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2017			

FEC Identification Number

C []

Transaction ID : D475537

Amount of Each Disbursement this Period

[] 262.49

Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz LLC

Mailing Address PO Box 75357

City
Washington

State
DC

Zip Code
20013-0357

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			06			2017			

FEC Identification Number

C []

Transaction ID : D475526

Amount of Each Disbursement this Period

[] 100.00

Memo Item

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

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

[] 457.49

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Freedom PAC

A. Evans & Katz LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : D475527

Amount of Each Disbursement this Period: 546.00

Memo Item

B. Evans & Katz LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013-0357

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2017

FEC Identification Number: C

Transaction ID : D475528

Amount of Each Disbursement this Period: 60.00

Memo Item

C. New Florida Majority

Full Name (Last, First, Middle Initial)

Mailing Address 8330 Biscayne Blvd. Suite 1

City Miami State FL Zip Code 33138

Purpose of Disbursement Office Overhead Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : D475529

Amount of Each Disbursement this Period: 4500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5106.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Florida Freedom PAC

Full Name (Last, First, Middle Initial) A. New Florida Majority		Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 07 / 2017	
Mailing Address 8330 Biscayne Blvd. Suite 1		FEC Identification Number C [] Transaction ID : D475530 Amount of Each Disbursement this Period [] 4500.00	
City Miami	State FL	Zip Code 33138	Category/ Type []
Purpose of Disbursement Office Overhead Costs		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) B. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y Y Y 09 / 06 / 2017	
Mailing Address 1101 15th Street NW Suite 500		FEC Identification Number C [] Transaction ID : D475531 Amount of Each Disbursement this Period [] 225.00	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Software and Support		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) C. NGP VAN		Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 30 / 2017	
Mailing Address 1101 15th Street NW Suite 500		FEC Identification Number C [] Transaction ID : D475532 Amount of Each Disbursement this Period [] 225.00	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Software and Support		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 4950.00	
TOTAL This Period (last page this line number only)..... ▶		[] 10798.49	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Florida Majority			Nature of Debt (Purpose): Office Overhead Costs
Mailing Address 8330 Biscayne Blvd. Suite 1			
City Miami	State FL	Zip Code 33138	

Outstanding Balance Beginning This Period		Transaction ID : D466686	
4500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4500.00	0.00	

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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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