

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

MARK DAVIS FOR FLORIDA

ADDRESS (number and street)

11316 28TH ST CIR E

Check if different
than previously
reported. (ACC)

PARRISH

FL

34219

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00914887

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

16

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
08 / 18 / 2026in the
State of

FL

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2026

through

M M / D D / Y Y Y Y
07 / 29 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer GABRIEL, KEITH, , ,

Signature of Treasurer

GABRIEL, KEITH, , ,

Date

M M / D D / Y Y Y Y
08 / 03 / 2026

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MARK DAVIS FOR FLORIDA

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2026

To:

M M / D D / Y Y Y Y
07 29 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9571.98	47544.07
(b) Total Contribution Refunds (from Line 20(d))	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	9571.98	47444.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7058.14	48006.32
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	3766.61
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7058.14	44239.71
8. Cash on Hand at Close of Reporting Period (from Line 27)	3204.36	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MARK DAVIS FOR FLORIDA

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2026

To:

MM / DD / YYYY
07 / 29 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

2365.47

8349.88

(ii) Unitemized.....

7206.51

37009.19

(iii) TOTAL of contributions
from individuals ▶

9571.98

45359.07

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate.....

0.00

2185.00

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

9571.98

47544.07

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

3766.61

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

0.00

0.00

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

9571.98

51310.68

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7058.14	48006.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(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 20(a), (b), and (c)).....	0.00	100.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7058.14	48106.32

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	690.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9571.98
25. SUBTOTAL (add Line 23 and Line 24).....	10262.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7058.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3204.36

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 16

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

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

NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

BERKOWITZ, DANIEL, , ,

A.

Mailing Address 514 WYNNWOOD DRIVE

City

BRANDON

State

FL

Zip Code

33511

FEC ID number of contributing
federal political committee.

C

Name of Employer

HARD ROCK

Occupation

FACILITIES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 06 2026

Transaction ID : SA11AI.7665

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CANCRO, DAN, , ,

B.

Mailing Address 2004 LAKE LINDA CIR

City

LUTZ

State

FL

Zip Code

33558

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

422.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 12 2026

Transaction ID : SA11AI.7313

Amount of Each Receipt this Period

86.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAVIS, JANE, , ,

C.

Mailing Address 783 26TH AVENUE NORTH

City

ST. PETERSBURG

State

FL

Zip Code

33704

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 11 2026

Transaction ID : SA11AI.7344

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

161.47

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

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

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

DAVIS, LAUREN, , ,

A.

Mailing Address 791 SUWANNEE CT NE

City

SAINT PETERSBURG

State

FL

Zip Code

33702

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 10 2026

Transaction ID : SA11AI.7356

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GROSHONG, JOSEPH, , ,

B.

Mailing Address 625 6TH ST N

City

ST PETERSBURG

State

FL

Zip Code

33701

FEC ID number of contributing
federal political committee.

C

Name of Employer
GOODRX

Occupation
DIRECTOR OF PERFORMANCE MANAGEME

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2026

Transaction ID : SA11AI.7066

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARVEY, REGINA, , ,

C.

Mailing Address 6615 68TH ST E

City

BRADENTON

State

FL

Zip Code

34203

FEC ID number of contributing
federal political committee.

C

Name of Employer
AETNA

Occupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 07 2026

Transaction ID : SA11AI.7567

Amount of Each Receipt this Period

44.00

☐ Memo Item

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

394.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 16

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

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

KARNS, JENNIFER, , ,

A.

Mailing Address 212 STONEHENGE DRIVE

City

ORCHARD PARK

State

NY

Zip Code

14127

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	2	6

Transaction ID : SA11AI.7600

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

MILES, CHRISTIAN, , ,

B.

Mailing Address 2039 NEW HAMPSHIRE AVE NW

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

NACDL

Occupation

VIDEO EDITOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	2	6

Transaction ID : SA11AI.7503

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

MILLER, SUSAN, , ,

C.

Mailing Address 4065 49TH AVE S

City

SAINT PETERSBURG

State

FL

Zip Code

33711

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	6

Transaction ID : SA11AI.7679

Amount of Each Receipt this Period

10.00



Memo Item

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

1010.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 16

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

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

WATSON, SHELLY, , ,

A.

Mailing Address 3180 STATE ROAD 13

City

SAINT JOHNS

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 09 2026

Transaction ID : SA11AI.7513

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, NORMAN, , ,

B.

Mailing Address 3 DARTMOUTH DR

City

MILFORD

State

MA

Zip Code

01757

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARES

Occupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

486.47

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2026

Transaction ID : SA11AI.7129

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-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)..... ▶

800.00

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

2365.47

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. AMPLIFY CLEARWATER

Mailing Address 1346 S FORT HARRISON AVE

City
CLEARWATERState
FLZip Code
33756Purpose of Disbursement
EVENT TICKETS - VOTER OUTREACH

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

280.50

Transaction ID : SB17.7913

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : SB17.7925

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3.40

Transaction ID : SB17.7926

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

290.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3.80

Transaction ID : SB17.7927

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

107.54

Transaction ID : SB17.7928

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

71.58

Transaction ID : SB17.7929

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

182.92

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

95.89

Transaction ID : SB17.7930

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

29.12

Transaction ID : SB17.7931

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	17	2026

FEC Identification Number

C

Amount of Each Disbursement this Period

16.60

Transaction ID : SB17.7932

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

141.61

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

7.20

Transaction ID : SB17.7933

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

10.40

Transaction ID : SB17.7934

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3.70

Transaction ID : SB17.7935

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

21.30

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

21.68

Transaction ID : SB17.7936

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12.76

Transaction ID : SB17.7937

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

19.70

Transaction ID : SB17.7938

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

54.14

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

77.80

Transaction ID : SB17.7939

☐ Memo Item**B. ASCENT TRAIL SOLUTIONS**

Mailing Address 5800 BEACH BLVD. STE 203-337

City
JACKSONVILLEState
FLZip Code
32207Purpose of Disbursement
ACCOUNTING AND COMPLIANCE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1538.00

Transaction ID : SB17.7914

☐ Memo Item**C. ASCENT TRAIL SOLUTIONS**

Mailing Address 5800 BEACH BLVD. STE 203-337

City
JACKSONVILLEState
FLZip Code
32207Purpose of Disbursement
ACCOUNTING AND COMPLIANCE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1538.00

Transaction ID : SB17.7915

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3153.80

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE LICENSES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

266.64

Transaction ID : SB17.7918

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HOFFMAN, CORA, , ,

Mailing Address 22010 60TH AVE E

City
BRADENTONState
FLZip Code
34211Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.7911

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HYMAN, RITA, , ,

Mailing Address 1304 BELVEDERE DR

City
KOKOMOState
INZip Code
46902Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.7912

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

916.64

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MARK DAVIS FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. OTCHEAP CUSTOM PRINTS

Mailing Address 275 WYMAN ST

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
CAMPAIGN SIGNS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1436.49

Transaction ID : SB17.7920

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ST. PETERSBURG AREA CHAMBER OF COMMERCE

Mailing Address 100 2ND AVE N \$150

City
ST. PETERSBURGState
FLZip Code
33701Purpose of Disbursement
EVENT TICKETS - VOTER OUTREACH

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.7922

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STARBRIGHT CLEANING

Mailing Address 4777 WHISPERING WIND AVE

City
TAMPAState
FLZip Code
33614Purpose of Disbursement
OFFICE CLEANING SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.7923

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1861.49

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

6622.80