

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 First, Florida Forever

ADDRESS (number and street) 610 S. Boulevard

Check if different than previously reported. (ACC)

Tampa FL 33606

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00647180

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

01 / 01 / 2018 through 03 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Watkins, Nancy, H., ,

Type or Print Name of Treasurer _____

Signature of Treasurer Watkins, Nancy, H., , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y

04 / 15 / 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)

Write or Type Committee Name

Florida First, Florida Forever

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="2018"/>	<input type="text" value="5219.73"/>	<input type="text" value="5219.73"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5219.73"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="79000.00"/>	<input type="text" value="79000.00"/>
(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="84219.73"/>	<input type="text" value="84219.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33711.37"/>	<input type="text" value="33711.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="50508.36"/>	<input type="text" value="50508.36"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Florida First, Florida Forever

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).....	79000.00	79000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	79000.00	79000.00
(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)	79000.00	79000.00
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)).....▶	79000.00	79000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	79000.00	79000.00

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	33711.37	33711.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	33711.37	33711.37
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	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33711.37	33711.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33711.37	33711.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	79000.00	79000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79000.00	79000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	33711.37	33711.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33711.37	33711.37

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<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 First, Florida Forever

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
A. Advanced Disposal		<input type="text" value="02"/> / <input type="text" value="08"/> / <input type="text" value="2018"/>
Mailing Address 90 Fort Wade Road		Transaction ID : SA11AI.4192
City Ponte Verda	State FL	Zip Code 32081
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
B. AFI Associates, Inc.		<input type="text" value="01"/> / <input type="text" value="16"/> / <input type="text" value="2018"/>
Mailing Address 111 Nature Walk Pakway, #102		Transaction ID : SA11AI.4165
City St. Augustine	State FL	Zip Code 32092
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25000.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="25000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
C. Constantine Constructors, Inc.		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2018"/>
Mailing Address 1988 Lewis Turner Blvd., #3		Transaction ID : SA11AI.4156
City Fort Walton Beach	State FL	Zip Code 32547
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="28000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<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

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NAME OF COMMITTEE (In Full)
Florida First, Florida Forever

A. Constantine Engineering, Inc.

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

Mailing Address 1988 Lewis Turner Blvd., #3

City Fort Walton Beach	State FL	Zip Code 32547
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	03	/	2018

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
5000.00

Memo Item

B. Constantine Engineering, Inc.

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

Mailing Address 1988 Lewis Turner Blvd., #3

City Fort Walton Beach	State FL	Zip Code 32547
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2018

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period
2500.00

Memo Item

C. Davis, Douglas M., , , Jr.

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

Mailing Address 512 Sebastian Square

City St. Augustine	State FL	Zip Code 32095
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Fletcher Davis	Occupation (for Individual) real estate executive
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2018

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<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

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NAME OF COMMITTEE (In Full)
Florida First, Florida Forever

A. Driver, McAfee, Peek & Hawthorne, P.L.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Independent Drive, #1200
 City Jacksonville State FL Zip Code 32202
 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 ▼ 1000.00

Date of Receipt **01 / 19 / 2018**
Transaction ID : SA11AI.4177
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Eastland Development Group, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Ponte Vedra Lakes Blvd.
 City Ponte Vedra Beach State FL Zip Code 32082
 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 ▼ 1000.00

Date of Receipt **01 / 26 / 2018**
Transaction ID : SA11AI.4188
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Eastland Partners, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Ponte Vedra Lakes Blvd.
 City Ponte Vedra Beach State FL Zip Code 32082
 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 ▼ 2000.00

Date of Receipt **01 / 26 / 2018**
Transaction ID : SA11AI.4187
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<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

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NAME OF COMMITTEE (In Full)
Florida First, Florida Forever

A. G & C Developers, Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10175 Fortune Parkway, #1005

City Jacksonville	State FL	Zip Code 32256
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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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	18	/	2018

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period
1000.00

Memo Item

B. Hinman, Roy, H., Dr., II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 Arricola Avenue

City St. Augustine	State FL	Zip Code 32080
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2018

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 5200 San Jose Blvd., #2

City Jacksonville	State FL	Zip Code 32207
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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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2018

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<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

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NAME OF COMMITTEE (In Full)
Florida First, Florida Forever

A. King Engineering Associates, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4921 Memorial Highway, #300
 City Tampa State FL Zip Code 33634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 03 / 2018
Transaction ID : SA11AI.4155
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. King Engineering Associates, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4921 Memorial Highway, #300
 City Tampa State FL Zip Code 33634
 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 ▼ 10000.00

Date of Receipt 01 / 18 / 2018
Transaction ID : SA11AI.4169
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Matovina & Company
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2955 Hartley Road, #108
 City Jacksonville State FL Zip Code 32257
 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 ▼ 1000.00

Date of Receipt 01 / 26 / 2018
Transaction ID : SA11AI.4189
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Florida First, Florida Forever

A. Miranda Contracting, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8442 W. Beaver Street

City Jacksonville	State FL	Zip Code 32220
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		15		2018

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 4314 Pablo Oaks Court

City Jacksonville	State FL	Zip Code 32224
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		18		2018

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 7909 McLaurin Road, N.

City Jacksonville	State FL	Zip Code 32256
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self-employed	Occupation (for Individual) engineer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2018

Transaction ID : SA11AI.4186

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Florida First, Florida Forever

A. Sunshine Land Holdings

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

Mailing Address 10175 Fortune Parkway, #1005

City Jacksonville	State FL	Zip Code 32256
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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 ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2018

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
1000.00

Memo Item

B. The PARC Group, Inc.

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

Mailing Address 4314 Pablo Oaks Court

City Jacksonville	State FL	Zip Code 32224
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2018

Transaction ID : SA11AI.4170

Amount of Each Receipt this Period
5000.00

Memo Item

C.

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	79000.00

**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

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 First, Florida Forever

Full Name (Last, First, Middle Initial)

A. A. Milano Strategies, Inc.

Mailing Address 7491 N. Federal Hwy., #C5-143

City Boca Raton State FL Zip Code 33487

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4182

Amount of Each Disbursement this Period

8577.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Avondale Travel

Mailing Address 3657 St. Johns Avenue

City Jacksonville State FL Zip Code 32205

Purpose of Disbursement travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4151

Amount of Each Disbursement this Period

571.20

Memo Item

Full Name (Last, First, Middle Initial)

C. eDonations.com

Mailing Address 117 N. St. Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2018

FEC Identification Number

C

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period

595.44

Memo Item

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

9744.14

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 First, Florida Forever

Full Name (Last, First, Middle Initial)
A. Robert Watkins & Company

Date of Disbursement: MM / DD / YYYY
03 / 22 / 2018

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement accounting services

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : **SB21B.4201**
Amount of Each Disbursement this Period: 2282.34

Memo Item

Full Name (Last, First, Middle Initial)
B. The Tarrance Group, Inc.

Date of Disbursement: MM / DD / YYYY
01 / 26 / 2018

Mailing Address 201 N. Union Street, #410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement research

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : **SB21B.4193**
Amount of Each Disbursement this Period: 16870.00

Memo Item

Full Name (Last, First, Middle Initial)
C. VoxPopuli Communications, LLC

Date of Disbursement: MM / DD / YYYY
01 / 11 / 2018

Mailing Address 1022 Park Street Suite 204

City Jacksonville State FL Zip Code 32204

Purpose of Disbursement PAC management

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : **SB21B.4160**
Amount of Each Disbursement this Period: 3500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 22652.34

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 First, Florida Forever

Full Name (Last, First, Middle Initial)

A. VoxPopuli Communications, LLC

Mailing Address 1022 Park Street
Suite 204

City Jacksonville State FL Zip Code 32204

Purpose of Disbursement
travel/lodging

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2018

FEC Identification Number

C []

Transaction ID : SB21B.4181
Amount of Each Disbursement this Period

[] 1166.88

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

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

[] 1166.88

[] 33563.36