

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) FLORIDA'S VOICE PAC			FEC IDENTIFICATION NUMBER ▼ C C00952630	
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee Bus Forceone			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 29 / 2026	
Mailing Address 4200 Hillcrest Dr Ste 112			Amount 2500.00	
City Pembroke Park		State FL	Zip Code 33021	Transaction ID : SE.4132
Purpose of Expenditure IE - Jones - Outdoor Advertising		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 07 / 29 / 2026
Name of Federal Candidate JONES, SHEVRIN, , ,		☒ Support ☐ Oppose		Office Sought: ☒ House District: 24 ☐ President ☐ Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		7500.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶
Full Name of Payee GM Print			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 29 / 2026	
Mailing Address 698 NW 112th St			Amount 2700.00	
City Miami		State FL	Zip Code 33168	Transaction ID : SE.4133
Purpose of Expenditure IE - Jones - Outdoor Advertising printing		Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 07 / 29 / 2026
Name of Federal Candidate JONES, SHEVRIN, , ,		☒ Support ☐ Oppose		Office Sought: ☒ House District: 24 ☐ President ☐ Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		10200.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			5200.00	
(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 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.				
Signature Philipczyk, Brandon, , ,			Date MM / DD / YYYY 07 / 30 / 2026	

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Check if ☒ 24-hour report ☐ 48-hour report		☒ New report ☐ Amends report filed on	

Full Name of Payee USA Fintech Solutions		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 23 / 2026	
Mailing Address 1858 NW 56 th Street		Amount 900.00	
City Miami	State FL	Zip Code 33142	Transaction ID : SE.4135
Purpose of Expenditure IE - Jones - Text Messaging		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 07 / 23 / 2026
Name of Federal Candidate JONES, SHEVRIN, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 26 ☐ President ☐ Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		16900.00	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	900.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	6100.00

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.

Philipczyk, Brandon, , ,

Signature

Date

MM / DD / YYYY
07 / 30 / 2026