

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
FRIENDS OF MATT GAETZ

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

	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))....	81123.81	117741.41
(b) Total Contribution Refunds (from Line 20(d))	2792.24	4840.17
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	78331.57	112901.24
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	216821.35	337935.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	2600.00	2600.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	214221.35	335335.52
8. Cash on Hand at Close of Reporting Period (from Line 27).....	569434.95	
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:

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 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS OF MATT GAETZ

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

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).....	11366.31	44483.91
(ii) Unitemized	69757.50	73257.50
(iii) TOTAL of contributions from individuals	81123.81	117741.41
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	81123.81	117741.41
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.)	2600.00	2600.00
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).....	83723.81	120341.41

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	216821.35	337935.52
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	2792.24	4840.17
(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)).....	2792.24	4840.17
21. OTHER DISBURSEMENTS	4000.00	4000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	223613.59	346775.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	709324.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	83723.81
25. SUBTOTAL (add Line 23 and Line 24).....	793048.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	223613.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	569434.95

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N
Transaction ID :

DUPPLICATES MAY HAVE BEEN MERGED OR SPOUSES SEPARATED. ECTD TOTALS REFLECTED IN THIS REPORT ARE CORRECT. THE COMMITTEE DISCOVERED A SERIES OF CHARGES ON THE CAMPAIGN CARD THAT THEY BELIEVE TO BE FRAUDULENT, AND DISPUTED THESE CHARGES WITH THE CARD PROVIDER. THE COMMITTEE WILL PROPERLY REPORT THE REVERSED CHARGES WHEN THEY ARE CREDITED BACK TO THE CARD.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
ADAIR, STEFAN, , ,

Mailing Address 1505 DANFORTH LANE

City OSPREY State FL Zip Code 34229

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

Name of Employer SELF Occupation SELF

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.76

Date of Receipt
M M / D D / Y Y Y Y Y
12 14 2022

Transaction ID : **A-2305046**

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ADAIR, STEFAN, , ,

Mailing Address 1505 DANFORTH LANE

City OSPREY State FL Zip Code 34229

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

Name of Employer SELF Occupation SELF

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.76

Date of Receipt
M M / D D / Y Y Y Y Y
12 18 2022

Transaction ID : **A-2305354**

Amount of Each Receipt this Period
20.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ADAIR, STEFAN, , ,

Mailing Address 1505 DANFORTH LANE

City OSPREY State FL Zip Code 34229

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

Name of Employer SELF Occupation SELF

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
245.99

Date of Receipt
M M / D D / Y Y Y Y Y
12 19 2022

Transaction ID : **A-2305537**

Amount of Each Receipt this Period
20.23

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.23

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: PAGE 7 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
ADAIR, STEFAN, , ,
 Mailing Address 1505 DANFORTH LANE
 City OSPREY State FL Zip Code 34229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation SELF
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 266.23

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2022
Transaction ID : A-2306153
 Amount of Each Receipt this Period
 20.24
 Memo Item

B. Full Name (Last, First, Middle Initial)
BAIRD, KATHLEEN, , ,
 Mailing Address 13 LINWOOD ROAD NW
 City FORT WALTON BEACH State FL Zip Code 32547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2022
Transaction ID : A-2305097
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BOLE, RICHARD, , ,
 Mailing Address 7581 CHELSEA
 City GATES MILLS State OH Zip Code 44040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2022
Transaction ID : A-2304821
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.24
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: PAGE 8 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
BOLE, RICHARD, , ,

Mailing Address 7581 CHELSEA

City GATES MILLS State OH Zip Code 44040

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2022

Transaction ID : **A-2305037**

Amount of Each Receipt this Period
 , , , 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BOLE, RICHARD, , ,

Mailing Address 7581 CHELSEA

City GATES MILLS State OH Zip Code 44040

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 485.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2022

Transaction ID : **A-2305435**

Amount of Each Receipt this Period
 , , , 10.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CARTER, JIM, , ,

Mailing Address 8424 PASEO DEL OCASO

City LA JOLLA State CA Zip Code 92037

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2022

Transaction ID : **A-2305351**

Amount of Each Receipt this Period
 , , , 250.00

Memo Item

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

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

, , , 510.00

, , ,

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 9 OF 80	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
CLAYBAUGH, WILLIAM, J, ,

Mailing Address 56641 858RD

City CARROLL	State NE	Zip Code 68723
-----------------	-------------	-------------------

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

Name of Employer RANCHER	Occupation TWJ FARMS
-----------------------------	-------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 235.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2022

Transaction ID : A-2305334

Amount of Each Receipt this Period
 , , 45.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CLAYBAUGH, WILLIAM, J, ,

Mailing Address 56641 858RD

City CARROLL	State NE	Zip Code 68723
-----------------	-------------	-------------------

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

Name of Employer RANCHER	Occupation TWJ FARMS
-----------------------------	-------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 280.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 21 / 2022

Transaction ID : A-2305725

Amount of Each Receipt this Period
 , , 45.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CLAYBAUGH, WILLIAM, J, ,

Mailing Address 56641 858RD

City CARROLL	State NE	Zip Code 68723
-----------------	-------------	-------------------

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

Name of Employer RANCHER	Occupation TWJ FARMS
-----------------------------	-------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 305.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2022

Transaction ID : A-2306347

Amount of Each Receipt this Period
 , , 25.00

Memo Item

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

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

, , 115.00

, ,

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 10 OF 80	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
CUNNIFF, HILARY, , ,

Mailing Address **12 EGLANTINE AVE**

City PENNINGTON	State NJ	Zip Code 08534
---------------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2022

Transaction ID : A-2303785

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
DEAN, RUSS JANET, , ,

Mailing Address **6770 E BLUEBIRD LANE**

City PARADISE VALLEY	State AZ	Zip Code 85253
--------------------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 22 / 2022

Transaction ID : A-2305806

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
DIAZ, FAUSTO, , ,

Mailing Address **537 SEVILLA AVE**

City CORAL GABLES	State FL	Zip Code 33134
-----------------------------	--------------------	--------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2022

Transaction ID : A-2305708

Amount of Each Receipt this Period

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
GARDNER, JOE, , ,

Mailing Address P O BOX 1129

City VERDI State NV Zip Code 89508

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 23 / 2022

Transaction ID : **A-2305880**

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GOOS, JEAN, M., MS.,

Mailing Address 7840 W PAINEAVE

City LAKEWOOD State CO Zip Code 80235

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2022

Transaction ID : **A-2306112**

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GOOS, JEAN, M., MS.,

Mailing Address 7840 W PAINEAVE

City LAKEWOOD State CO Zip Code 80235

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2022

Transaction ID : **A-2306116**

Amount of Each Receipt this Period
50.00

Memo Item

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

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

200.00

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 12 OF 80	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
GRANDFIELD, WALTER, , ,

Mailing Address 1126 WEST GLENHAVEN DRIVE, 0:129,

City PHOENIX	State AZ	Zip Code 85045
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 25 / 2022

Transaction ID : A-2305969

Amount of Each Receipt this Period
 , , 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GREYTAK, MICHAEL, , ,

Mailing Address 6513 132ND AVE NE, 406

City KIRKLAND	State WA	Zip Code 98033
------------------	-------------	-------------------

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

Name of Employer VARIOUS	Occupation VARIOUS
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2022

Transaction ID : A-2306154

Amount of Each Receipt this Period
 , , 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HARDING, TIM, T, MR,

Mailing Address 15696 HARDING ROAD

City BRYAN	State TX	Zip Code 77807
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation DITCH DIGGER
--------------------------	----------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 204.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2022

Transaction ID : A-2305531

Amount of Each Receipt this Period
 , , 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 700.00
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
LAMPTON, TANA, , ,

Mailing Address 2362 WEST MOUNTAIN OAK ROAD

City PRESCOTT	State AZ	Zip Code 86305
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 202.76

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 12 / 2022

Transaction ID : A-2304858

Amount of Each Receipt this Period
 , , 35.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAMPTON, TANA, , ,

Mailing Address 2362 WEST MOUNTAIN OAK ROAD

City PRESCOTT	State AZ	Zip Code 86305
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 227.76

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2022

Transaction ID : A-2305275

Amount of Each Receipt this Period
 , , 25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LAMPTON, TANA, , ,

Mailing Address 2362 WEST MOUNTAIN OAK ROAD

City PRESCOTT	State AZ	Zip Code 86305
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 352.76

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 26 / 2022

Transaction ID : A-2306010

Amount of Each Receipt this Period
 , , 50.00

Memo Item

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

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

, , 110.00

, ,

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
LAYTON, EVA, , MS.,

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY State NV Zip Code 89703

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 09 / 2022

Transaction ID : **A-2304580**

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LAYTON, EVA, , MS.,

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY State NV Zip Code 89703

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2022

Transaction ID : **A-2304681**

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LAYTON, EVA, , MS.,

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY State NV Zip Code 89703

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2022

Transaction ID : **A-2304791**

Amount of Each Receipt this Period
25.00

Memo Item

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

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

100.00

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 18 OF 80	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
LUCHT, NANCY, J, ,

Mailing Address 116 FAIRVIEW AVE N, APARTMENT 1221

City SEATTLE	State WA	Zip Code 98109
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 10 / 2022

Transaction ID : A-2304633

Amount of Each Receipt this Period
 , , 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LUCHT, NANCY, J, ,

Mailing Address 116 FAIRVIEW AVE N, APARTMENT 1221

City SEATTLE	State WA	Zip Code 98109
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 10 / 2022

Transaction ID : A-2304634

Amount of Each Receipt this Period
 , , 25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City JACKSON CENTER	State OH	Zip Code 45334
------------------------	-------------	-------------------

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

Name of Employer OWNER	Occupation SHELBY
---------------------------	----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2022

Transaction ID : A-2305551

Amount of Each Receipt this Period
 , , 250.00

Memo Item

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

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

, , 375.00

, ,

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 19 OF 80	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
MCBRIDE, HERMAN, , ,

Mailing Address 309 SOUTH FORK

City JACKSON CENTER	State OH	Zip Code 45334
------------------------	-------------	-------------------

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

Name of Employer OWNER	Occupation SHELBY
---------------------------	----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2023 2024 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040 2041 2042 2043 2044 2045 2046 2047 2048 2049 2050 2051 2052 2053 2054 2055 2056 2057 2058 2059 2060 2061 2062 2063 2064 2065 2066 2067 2068 2069 2070 2071 2072 2073 2074 2075 2076 2077 2078 2079 2080 2081 2082 2083 2084 2085 2086 2087 2088 2089 2090 2091 2092 2093 2094 2095 2096 2097 2098 2099 2100 2101 2102 2103 2104 2105 2106 2107 2108 2109 2110 2111 2112 2113 2114 2115 2116 2117 2118 2119 2120 2121 2122 2123 2124 2125 2126 2127 2128 2129 2130 2131 2132 2133 2134 2135 2136 2137 2138 2139 2140 2141 2142 2143 2144 2145 2146 2147 2148 2149 2150 2151 2152 2153 2154 2155 2156 2157 2158 2159 2160 2161 2162 2163 2164 2165 2166 2167 2168 2169 2170 2171 2172 2173 2174 2175 2176 2177 2178 2179 2180 2181 2182 2183 2184 2185 2186 2187 2188 2189 2190 2191 2192 2193 2194 2195 2196 2197 2198 2199 2200 2201 2202 2203 2204 2205 2206 2207 2208 2209 2210 2211 2212 2213 2214 2215 2216 2217 2218 2219 2220 2221 2222 2223 2224 2225 2226 2227 2228 2229 2230 2231 2232 2233 2234 2235 2236 2237 2238 2239 2240 2241 2242 2243 2244 2245 2246 2247 2248 2249 2250 2251 2252 2253 2254 2255 2256 2257 2258 2259 2260 2261 2262 2263 2264 2265 2266 2267 2268 2269 2270 2271 2272 2273 2274 2275 2276 2277 2278 2279 2280 2281 2282 2283 2284 2285 2286 2287 2288 2289 2290 2291 2292 2293 2294 2295 2296 2297 2298 2299 2300 2301 2302 2303 2304 2305 2306 2307 2308 2309 2310 2311 2312 2313 2314 2315 2316 2317 2318 2319 2320 2321 2322 2323 2324 2325 2326 2327 2328 2329 2330 2331 2332 2333 2334 2335 2336 2337 2338 2339 2340 2341 2342 2343 2344 2345 2346 2347 2348 2349 2350 2351 2352 2353 2354 2355 2356 2357 2358 2359 2360 2361 2362 2363 2364 2365 2366 2367 2368 2369 2370 2371 2372 2373 2374 2375 2376 2377 2378 2379 2380 2381 2382 2383 2384 2385 2386 2387 2388 2389 2390 2391 2392 2393 2394 2395 2396 2397 2398 2399 2400 2401 2402 2403 2404 2405 2406 2407 2408 2409 2410 2411 2412 2413 2414 2415 2416 2417 2418 2419 2420 2421 2422 2423 2424 2425 2426 2427 2428 2429 2430 2431 2432 2433 2434 2435 2436 2437 2438 2439 2440 2441 2442 2443 2444 2445 2446 2447 2448 2449 2450 2451 2452 2453 2454 2455 2456 2457 2458 2459 2460 2461 2462 2463 2464 2465 2466 2467 2468 2469 2470 2471 2472 2473 2474 2475 2476 2477 2478 2479 2480 2481 2482 2483 2484 2485 2486 2487 2488 2489 2490 2491 2492 2493 2494 2495 2496 2497 2498 2499 2500 2501 2502 2503 2504 2505 2506 2507 2508 2509 2510 2511 2512 2513 2514 2515 2516 2517 2518 2519 2520 2521 2522 2523 2524 2525 2526 2527 2528 2529 2530 2531 2532 2533 2534 2535 2536 2537 2538 2539 2540 2541 2542 2543 2544 2545 2546 2547 2548 2549 2550 2551 2552 2553 2554 2555 2556 2557 2558 2559 2560 2561 2562 2563 2564 2565 2566 2567 2568 2569 2570 2571 2572 2573 2574 2575 2576 2577 2578 2579 2580 2581 2582 2583 2584 2585 2586 2587 2588 2589 2590 2591 2592 2593 2594 2595 2596 2597 2598 2599 2600 2601 2602 2603 2604 2605 2606 2607 2608 2609 2610 2611 2612 2613 2614 2615 2616 2617 2618 2619 2620 2621 2622 2623 2624 2625 2626 2627 2628 2629 2630 2631 2632 2633 2634 2635 2636 2637 2638 2639 2640 2641 2642 2643 2644 2645 2646 2647 2648 2649 2650 2651 2652 2653 2654 2655 2656 2657 2658 2659 2660 2661 2662 2663 2664 2665 2666 2667 2668 2669 2670 2671 2672 2673 2674 2675 2676 2677 2678 2679 2680 2681 2682 2683 2684 2685 2686 2687 2688 2689 2690 2691 2692 2693 2694 2695 2696 2697 2698 2699 2700 2701 2702 2703 2704 2705 2706 2707 2708 2709 2710 2711 2712 2713 2714 2715 2716 2717 2718 2719 2720 2721 2722 2723 2724 2725 2726 2727 2728 2729 2730 2731 2732 2733 2734 2735 2736 2737 2738 2739 2740 2741 2742 2743 2744 2745 2746 2747 2748 2749 2750 2751 2752 2753 2754 2755 2756 2757 2758 2759 2760 2761 2762 2763 2764 2765 2766 2767 2768 2769 2770 2771 2772 2773 2774 2775 2776 2777 2778 2779 2780 2781 2782 2783 2784 2785 2786 2787 2788 2789 2790 2791 2792 2793 2794 2795 2796 2797 2798 2799 2800 2801 2802 2803 2804 2805 2806 2807 2808 2809 2810 2811 2812 2813 2814 2815 2816 2817 2818 2819 2820 2821 2822 2823 2824 2825 2826 2827 2828 2829 2830 2831 2832 2833 2834 2835 2836 2837 2838 2839 2840 2841 2842 2843 2844 2845 2846 2847 2848 2849 2850 2851 2852 2853 2854 2855 2856 2857 2858 2859 2860 2861 2862 2863 2864 2865 2866 2867 2868 2869 2870 2871 2872 2873 2874 2875 2876 2877 2878 2879 2880 2881 2882 2883 2884 2885 2886 2887 2888 2889 2890 2891 2892 2893 2894 2895 2896 2897 2898 2899 2900 2901 2902 2903 2904 2905 2906 2907 2908 2909 2910 2911 2912 2913

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
NIX, JEFF, , ,

Mailing Address 979 FM-1139

City: ROCKWALL State: TX Zip Code: 75032

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

Name of Employer: CONSTRUCTION Occupation: SCCI

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 12 / 2022

Transaction ID : **A-2304867**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REINHARD, DONALD, G., MR.,

Mailing Address 75 HARVARD AVE

City: PALMERTON State: PA Zip Code: 18071-1212

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

Name of Employer: EXECUTIVE Occupation: RENCOR

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2022

Transaction ID : **A-2311464**

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROBINSON, KEN, , ,

Mailing Address 1435 EAST G ST.

City: OAKDALE State: CA Zip Code: 95361

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2022

Transaction ID : **A-2305729**

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 22 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
STOCKEL, MARVIN, , ,
 Mailing Address 20571 LINKS CIRCLE
 City BOCA RATON State FL Zip Code 33434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2022
Transaction ID : A-2304404
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
TANNER, LOIS, , ,
 Mailing Address 2075 #13 SCENIC GULF DR.
 City MIRAMAR BEACH State FL Zip Code 32550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2022
Transaction ID : A-2304585
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
WALTON, RANDIE, M, MS,
 Mailing Address 1611 N HERMITAGE AVE APT. 205
 City CHICAGO State IL Zip Code 60622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SALES Occupation SALES
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 208.96

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2022
Transaction ID : A-2305062
 Amount of Each Receipt this Period
 104.48
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 854.48
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 23 OF 80	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
WHEATLEY, THOMAS, , ,

Mailing Address 416 MOHRVILLE ROAD

City SHOEMAKERSVILLE	State PA	Zip Code 19555
-------------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 208.96

Date of Receipt
 / / 12 / 31 / 2022

Transaction ID : A-2306384

Amount of Each Receipt this Period
 , , 104.48

Memo Item

B. Full Name (Last, First, Middle Initial)
WOODS, ALAN, , ,

Mailing Address 5329 NW 17 AVE, #606

City MIAMI	State FL	Zip Code 33142
---------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 10.00

Date of Receipt
 / / 12 / 22 / 2022

Transaction ID : A-2305783

Amount of Each Receipt this Period
 , , 5.00

Memo Item

C. Full Name (Last, First, Middle Initial)
YUAN, WENYI, , ,

Mailing Address 9960 63RD RD #7G

City REGO PARK	State NY	Zip Code 11374
-------------------	-------------	-------------------

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

Name of Employer CEO	Occupation ETERNA INC.
-------------------------	---------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 225.00

Date of Receipt
 / / 12 / 19 / 2022

Transaction ID : A-2305475

Amount of Each Receipt this Period
 , , 25.00

Memo Item

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

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

, , 134.48

, ,

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 24 OF 80	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
YUAN, WENYI, , ,

Mailing Address 9960 63RD RD #7G

City REGO PARK	State NY	Zip Code 11374
-------------------	-------------	-------------------

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

Name of Employer CEO	Occupation ETERNA INC.
-------------------------	---------------------------

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 25 / 2022

Transaction ID : A-2305968

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)

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

C. Full Name (Last, First, Middle Initial)

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)..... ▶

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

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<input type="text" value="11366.31"/>

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 25 OF 80	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. Full Name (Last, First, Middle Initial)
NBI PROPERTIES

Mailing Address 154 BROOK STREET
SUITE 101

City FORT WALTON BEACH State FL Zip Code 32548

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

Name of Employer Occupation

Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
17572.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 01 / 2022

Transaction ID : **A-2298741**

Amount of Each Receipt this Period
2600.00

Memo Item
OFFSET - RENT EXPENSE ON 2/28/2022

B. Full Name (Last, First, Middle Initial)

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

C. Full Name (Last, First, Middle Initial)

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)..... ▶	2600.00
TOTAL This Period (last page this line number only)..... ▶	2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 18.97	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2317013	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 32.33	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2317014	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 19.85	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2317019	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 32.33	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2317030	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 19.85	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2317035	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 18.97	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2317031	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 63.77	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2316942	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ALLIANZ INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address P.O. BOX 71533			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23255	Amount of Each Disbursement this Period 29.53	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type 002	Transaction ID : B-2316943	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 70.00	
Purpose of Disbursement AIRLINE FEE		Category/ Type 002	Transaction ID : B-2316994	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 39.32		
Purpose of Disbursement AIRLINE FEE		Category/ Type 002	Transaction ID : B-2317015		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 557.10		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317016		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 294.61		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317017		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022
Mailing Address 4333 AMON CENTER BLVD.		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 337.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317018 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022
Mailing Address 4333 AMON CENTER BLVD.		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 557.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317032 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022
Mailing Address 4333 AMON CENTER BLVD.		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement AIRFARE	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 294.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317033 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 337.10	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317034	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 694.71	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316977	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 593.71	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316996	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 37.19		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316978		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 318.70		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316979		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 293.11		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317001		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement AIRLINE FEE		Category/ Type 002	Transaction ID : B-2317000	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 221.31	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317037	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 294.61	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316972	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 39.32		
Purpose of Disbursement AIRLINE FEE		Category/ Type 002	Transaction ID : B-2316916		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 293.11		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316934		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 30.00		
Purpose of Disbursement AIRLINE FEE		Category/ Type 002	Transaction ID : B-2316935		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 439.29	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317028	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 557.10	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316917	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 294.61	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316918	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 799.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317027	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 337.10	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316919	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 786.20	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316940	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 786.20		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2317021		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 73.20		
Purpose of Disbursement AIRLINE FEE		Category/ Type 002	Transaction ID : B-2317022		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022		
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 799.60		
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316901		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 799.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316902	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 384.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316903	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 168.60	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : B-2316904	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 384.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316911	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 168.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316946	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 384.60	
Purpose of Disbursement AIRFARE		Category/ Type 002	Transaction ID : B-2316947	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 799.60	
Purpose of Disbursement AIRFARE		Category/Type 002	Transaction ID : B-2316950	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 4333 AMON CENTER BLVD.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 384.60	
Purpose of Disbursement AIRFARE		Category/Type 002	Transaction ID : B-2316948	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.54	
Purpose of Disbursement E-MERCHANT FEES		Category/Type 001	Transaction ID : B-2252428	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.54
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 Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.54	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298650	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 4.00	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298735	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 14.60	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298734	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	19.14
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 Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 39.70	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298664	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 12.40	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298665	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.54	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298667	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	52.64
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 Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 5.70	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298666	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.54	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298676	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 3.20	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298679	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	9.44
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 Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 3.20	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298687	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.54	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298697	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 1.70	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298686	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5.44
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 Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 29.97	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316955	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 37.98	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316956	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 19.98	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316957	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 28.47	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316958	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 37.96	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316960	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 36.96	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316961	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 17.98	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316959	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 29.97	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316962	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. APPLE			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 19.99	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316963	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. APPLE			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 9.99	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316964	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. APPLE			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 12.37	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316965	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. APPLE			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 28.47	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316968	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. APPLE			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 14.99	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316969	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. APPLE			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2022	
Mailing Address 1 INFINITE LOOP			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 35.96	
Purpose of Disbursement DISPUTED CHARGES, PENDING BANK RETURN		Category/ Type 001	Transaction ID : B-2316971	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BEST BUY			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2022	
Mailing Address 8350 SOUTH ORANGE BLOSSOM TRAIL			FEC Identification Number C	
City ORLANDO	State FL	Zip Code 32809	Amount of Each Disbursement this Period 137.21	
Purpose of Disbursement GENERAL OFFICE SUPPLIES		Category/ Type 001	Transaction ID : B-2317009	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. BEST BUY			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2022	
Mailing Address 8350 SOUTH ORANGE BLOSSOM TRAIL			FEC Identification Number C	
City ORLANDO	State FL	Zip Code 32809	Amount of Each Disbursement this Period 53.49	
Purpose of Disbursement GENERAL OFFICE SUPPLIES		Category/ Type 001	Transaction ID : B-2317012	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BIG RED WALL			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2022	
Mailing Address 918 WHIRLAWAY DRIVE			FEC Identification Number C	
City UNION	State KY	Zip Code 41091	Amount of Each Disbursement this Period 44864.48	
Purpose of Disbursement FUNDRAISING CONSULTING AND EMAIL BLASTS		Category/ Type 003	Transaction ID : B-2298662	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BLACKBIRD MODERN ASIAN			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2022	
Mailing Address 1511 NORTH OLD DIXIE HIGHWAY			FEC Identification Number C	
City JUPITER	State FL	Zip Code 33469	Amount of Each Disbursement this Period 1300.33	
Purpose of Disbursement CATERING		Category/ Type 003	Transaction ID : B-2316954	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	44864.48
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 Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. BOATWRIGHT, CHELSEA, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022	
Mailing Address 2721 ELKHORN DRIVE			FEC Identification Number C	
City MILTON	State FL	Zip Code 32571	Amount of Each Disbursement this Period 923.50	
Purpose of Disbursement PAYROLL		Category/ Type 001	Transaction ID : B-2252423	
Candidate Name		Memo Item MEMO: SUBVENDOR OF-GUSTO		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BOATWRIGHT, CHELSEA, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 2721 ELKHORN DRIVE			FEC Identification Number C	
City MILTON	State FL	Zip Code 32571	Amount of Each Disbursement this Period 923.50	
Purpose of Disbursement PAYROLL		Category/ Type 001	Transaction ID : B-2317038	
Candidate Name		Memo Item MEMO: SUBVENDOR OF-GUSTO		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CFS COMPLIANCE			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2022	
Mailing Address 4905 DEL RAY AVENUE			FEC Identification Number C	
City BETHESDA	State MD	Zip Code 20814	Amount of Each Disbursement this Period 2330.44	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Transaction ID : B-2252421	
Candidate Name		Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2330.44
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 Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. CFS COMPLIANCE

Full Name (Last, First, Middle Initial)
Mailing Address 4905 DEL RAY AVENUE

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement COMPLIANCE CONSULTING Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 11000.00

Transaction ID : B-2298669

Memo Item

B. CONSTANT CONTACT

Full Name (Last, First, Middle Initial)
Mailing Address 1601 TRAPELO ROAD

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement SOFTWARE SERVICE Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 16 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 1293.00

Transaction ID : B-2298671

Memo Item

C. DIRECT MAIL PROCESSORS, INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement DIRECT MAIL Category/Type 003

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 5576.89

Transaction ID : B-2298722

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 17869.89

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 Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. DIRECT MAIL PROCESSORS, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 1150 CONRAD COURT			FEC Identification Number C	
City HAGERSTOWN	State MD	Zip Code 21740	Amount of Each Disbursement this Period 1843.20	
Purpose of Disbursement DIRECT MAIL		Category/ Type 003	Transaction ID : B-2298678	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022	
Mailing Address P.O. BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 11993.89	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Transaction ID : B-2298721	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022	
Mailing Address P.O. BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 4248.44	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Transaction ID : B-2298723	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	18085.53
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 Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022	
Mailing Address P.O. BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 3157.43	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Transaction ID : B-2298724	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022	
Mailing Address P.O. BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 166.69	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Transaction ID : B-2298730	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2022	
Mailing Address P.O. BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 39.00	
Purpose of Disbursement CREDIT CARD FEE		Category/ Type 001	Transaction ID : B-2316905	
Candidate Name		<input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3324.12
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 Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2022		
Mailing Address P.O. BOX 2818			FEC Identification Number C		
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 12936.90		
Purpose of Disbursement SEE MEMOS ITEMS		Category/ Type 001	Transaction ID : B-2298673		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022		
Mailing Address P.O. BOX 2818			FEC Identification Number C		
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 12847.59		
Purpose of Disbursement SEE MEMOS ITEMS		Category/ Type 001	Transaction ID : B-2298674		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. FULFILLMENT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022		
Mailing Address 44970 FALCON PLACE			FEC Identification Number C		
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 19592.40		
Purpose of Disbursement DIRECT MAIL		Category/ Type 003	Transaction ID : B-2298720		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	45376.89
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 Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. FULFILLMENT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2022	
Mailing Address 44970 FALCON PLACE			FEC Identification Number C	
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement DIRECT MAIL		Category/ Type 003	Transaction ID : B-2298688	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FULFILLMENT SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2022	
Mailing Address 44970 FALCON PLACE			FEC Identification Number C	
City STERLING	State VA	Zip Code 20166	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement DIRECT MAIL		Category/ Type 003	Transaction ID : B-2298689	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. GUSTO			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022	
Mailing Address 525 20TH STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 2288.75	
Purpose of Disbursement PAYROLL - SEE MEMO ITEMS		Category/ Type 001	Transaction ID : B-2252422	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	8288.75
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 Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022
Mailing Address 525 20TH STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 406.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2252426
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2022
Mailing Address 525 20TH STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 57.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2252435
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022
Mailing Address 525 20TH STREET		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 406.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2298693
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	869.80
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 Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. GUSTO			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 525 20TH STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 2288.75	
Purpose of Disbursement PAYROLL - SEE MEMO ITEMS		Category/ Type 001	Transaction ID : B-2298694	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HERTZ			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2022	
Mailing Address 10995 TERMINAL ACCESS ROAD			FEC Identification Number C	
City FORT MYERS	State FL	Zip Code 33913	Amount of Each Disbursement this Period 148.50	
Purpose of Disbursement CAR RENTAL		Category/ Type 002	Transaction ID : B-2316997	
Candidate Name		<input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HERTZ			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2022	
Mailing Address 10995 TERMINAL ACCESS ROAD			FEC Identification Number C	
City FORT MYERS	State FL	Zip Code 33913	Amount of Each Disbursement this Period 1654.26	
Purpose of Disbursement CAR RENTAL		Category/ Type 002	Transaction ID : B-2317036	
Candidate Name		<input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2288.75
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 Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. HERTZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2022
Mailing Address 10995 TERMINAL ACCESS ROAD		FEC Identification Number C
City FORT MYERS	State FL	Zip Code 33913
Purpose of Disbursement CAR RENTAL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 1654.26	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2316998 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

Full Name (Last, First, Middle Initial) B. HERTZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2022
Mailing Address 10995 TERMINAL ACCESS ROAD		FEC Identification Number C
City FORT MYERS	State FL	Zip Code 33913
Purpose of Disbursement TOLL	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 21.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317020 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

Full Name (Last, First, Middle Initial) C. HERTZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2022
Mailing Address 10995 TERMINAL ACCESS ROAD		FEC Identification Number C
City FORT MYERS	State FL	Zip Code 33913
Purpose of Disbursement CAR RENTAL FEE	Category/Type 002	
Candidate Name	Amount of Each Disbursement this Period 11.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317024 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. HERTZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2022
Mailing Address 10995 TERMINAL ACCESS ROAD		FEC Identification Number C
City FORT MYERS	State FL	Zip Code 33913
Purpose of Disbursement TOLL	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 11.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317025 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

Full Name (Last, First, Middle Initial) B. HERTZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2022
Mailing Address 10995 TERMINAL ACCESS ROAD		FEC Identification Number C
City FORT MYERS	State FL	Zip Code 33913
Purpose of Disbursement TOLLS	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 21.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2317029 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

Full Name (Last, First, Middle Initial) C. HERTZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2022
Mailing Address 10995 TERMINAL ACCESS ROAD		FEC Identification Number C
City FORT MYERS	State FL	Zip Code 33913
Purpose of Disbursement CAR RENTAL	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 1467.89	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2316937 <input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2022	
Mailing Address 1144 AIRPORT BOULEVARD			FEC Identification Number C	
City PENSACOLA	State FL	Zip Code 32504	Amount of Each Disbursement this Period 112.11	
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2317004	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HILTON GARDEN INN			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2022	
Mailing Address 1144 AIRPORT BOULEVARD			FEC Identification Number C	
City PENSACOLA	State FL	Zip Code 32504	Amount of Each Disbursement this Period 115.11	
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2317005	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HILTON GARDEN INN			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022	
Mailing Address 1144 AIRPORT BOULEVARD			FEC Identification Number C	
City PENSACOLA	State FL	Zip Code 32504	Amount of Each Disbursement this Period 115.11	
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2316930	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. HILTON GARDEN INN			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022		
Mailing Address 1144 AIRPORT BOULEVARD			FEC Identification Number C		
City PENSACOLA	State FL	Zip Code 32504	Amount of Each Disbursement this Period 112.11		
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2316931		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. HOLIDAY INN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2022		
Mailing Address 8510 KESHAV TAYLOR DRIVE			FEC Identification Number C		
City MILTON	State FL	Zip Code 32583	Amount of Each Disbursement this Period 206.11		
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2317008		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. HOLIDAY INN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022		
Mailing Address 8510 KESHAV TAYLOR DRIVE			FEC Identification Number C		
City MILTON	State FL	Zip Code 32583	Amount of Each Disbursement this Period 206.11		
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2316927		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. HOLIDAY INN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 8510 KESHAV TAYLOR DRIVE			FEC Identification Number C	
City MILTON	State FL	Zip Code 32583	Amount of Each Disbursement this Period 206.11	
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2316928	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HOLIDAY INN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2022	
Mailing Address 8510 KESHAV TAYLOR DRIVE			FEC Identification Number C	
City MILTON	State FL	Zip Code 32583	Amount of Each Disbursement this Period 206.11	
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2317007	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HOUSE GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022	
Mailing Address 15 INDEPENDENCE AVENUE SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20016	Amount of Each Disbursement this Period 9525.00	
Purpose of Disbursement SUPPORTER GIFTS		Category/ Type 006	Transaction ID : B-2316900	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. HOUSE GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2022	
Mailing Address 15 INDEPENDENCE AVENUE SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20016	Amount of Each Disbursement this Period 9525.00	
Purpose of Disbursement SUPPORTER GIFTS		Category/Type 006	Transaction ID : B-2316951	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HSP DIRECT LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022	
Mailing Address 20130 LAKEVIEW CENTER PLAZA STE 300			FEC Identification Number C	
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 9600.00	
Purpose of Disbursement DIRECT MAIL		Category/Type 003	Transaction ID : B-2252434	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HSP DIRECT LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022	
Mailing Address 20130 LAKEVIEW CENTER PLAZA STE 300			FEC Identification Number C	
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 1461.24	
Purpose of Disbursement DIRECT MAIL		Category/Type 003	Transaction ID : B-2298691	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	11061.24
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 Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. INTEGRAM		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022
Mailing Address 22695 COMMERCE CENTER COURT		FEC Identification Number C
City DULLES	State VA	Zip Code 20166
Purpose of Disbursement POSTAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 13976.31	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2252432
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. INTEGRAM		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2022
Mailing Address 22695 COMMERCE CENTER COURT		FEC Identification Number C
City DULLES	State VA	Zip Code 20166
Purpose of Disbursement POSTAGE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2986.82	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2298725
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. INTEGRATED SOLUTIONS: POLITICAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2022
Mailing Address 4142 ADAMS AVENUE SUITE 103-550		FEC Identification Number C
City SAN DIEGO	State CA	Zip Code 92116
Purpose of Disbursement SOFTWARE SERVICE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 650.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2252436
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	17613.13
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 Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. LANE, JILLIAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022	
Mailing Address 313 4TH STREET NORTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 923.50	
Purpose of Disbursement PAYROLL		Category/ Type 001	Transaction ID : B-2252424	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-GUSTO		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. LANE, JILLIAN, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 313 4TH STREET NORTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 923.50	
Purpose of Disbursement PAYROLL		Category/ Type 001	Transaction ID : B-2317039	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-GUSTO		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. MEDIA PLACEMENT SERVICES			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022	
Mailing Address PO BOX 753771			FEC Identification Number C	
City LAS VEGAS	State NV	Zip Code 89136	Amount of Each Disbursement this Period 25000.00	
Purpose of Disbursement ADVERTISING		Category/ Type 004	Transaction ID : B-2298675	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	25000.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. NICEVILLE VALPARAISO CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022		
Mailing Address 1055 JOHN SIMS PARKWAY			FEC Identification Number C		
City NICEVILLE	State FL	Zip Code 32578	Amount of Each Disbursement this Period 595.00		
Purpose of Disbursement EVENT TICKET		Category/ Type 007	Transaction ID : B-2316945		
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. NOVA LIST			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2022		
Mailing Address 20130 LAKEVIEW CENTER PLAZA SUITE 300			FEC Identification Number C		
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 5584.85		
Purpose of Disbursement DONOR LISTS		Category/ Type 003	Transaction ID : B-2252433		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. PFEIFFER PUBLIC AFFAIRS			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022		
Mailing Address 8 THE GREEN #11328			FEC Identification Number C		
City DOVER	State DE	Zip Code 19901	Amount of Each Disbursement this Period 8000.00		
Purpose of Disbursement STRATEGIC CAMPAIGN CONSULTING		Category/ Type 001	Transaction ID : B-2262525		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	13584.85
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 Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. SIMPLYTOIMPRESS.COM			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2022	
Mailing Address 23801 CALABASAS ROAD SUITE 2005			FEC Identification Number C	
City CALABASAS	State CA	Zip Code 91302	Amount of Each Disbursement this Period 746.59	
Purpose of Disbursement SUPPORTER GIFTS		Category/ Type 006	Transaction ID : B-2316899	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SIMPLYTOIMPRESS.COM			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2022	
Mailing Address 23801 CALABASAS ROAD SUITE 2005			FEC Identification Number C	
City CALABASAS	State CA	Zip Code 91302	Amount of Each Disbursement this Period 746.59	
Purpose of Disbursement SUPPORTER GIFTS		Category/ Type 006	Transaction ID : B-2317026	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. SLEEP INN			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2022	
Mailing Address 10775 EMERALD COAST PARKWAY WEST			FEC Identification Number C	
City DESTIN	State FL	Zip Code 32550	Amount of Each Disbursement this Period 77.28	
Purpose of Disbursement LODGING		Category/ Type 002	Transaction ID : B-2316987	
Candidate Name		Memo Item <input checked="" type="checkbox"/> MEMO: SUBVENDOR OF-FIRST BANKCARD		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. SLEEP INN

Full Name (Last, First, Middle Initial)
Mailing Address 10775 EMERALD COAST PARKWAY WEST

City DESTIN State FL Zip Code 32550

Purpose of Disbursement LODGING Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 99.68

Transaction ID : B-2316988

Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD

B. SLEEP INN

Full Name (Last, First, Middle Initial)
Mailing Address 10775 EMERALD COAST PARKWAY WEST

City DESTIN State FL Zip Code 32550

Purpose of Disbursement LODGING Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 99.68

Transaction ID : B-2316989

Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD

C. STRIPE

Full Name (Last, First, Middle Initial)
Mailing Address 3180 18TH STREET SUITE 100

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement E-MERCHANT FEES Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 765.34

Transaction ID : B-2298728

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 765.34

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 Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022	
Mailing Address 3180 18TH STREET SUITE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94110	Amount of Each Disbursement this Period 1055.41	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298727	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022	
Mailing Address 3180 18TH STREET SUITE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94110	Amount of Each Disbursement this Period - 5.00	
Purpose of Disbursement CREDIT: E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2311874	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 3180 18TH STREET SUITE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94110	Amount of Each Disbursement this Period 1242.37	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298726	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2292.78
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 Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022	
Mailing Address 3180 18TH STREET SUITE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94110	Amount of Each Disbursement this Period 1218.23	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298699	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 3180 18TH STREET SUITE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94110	Amount of Each Disbursement this Period 951.48	
Purpose of Disbursement E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2298700	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 3180 18TH STREET SUITE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94110	Amount of Each Disbursement this Period - 9.30	
Purpose of Disbursement CREDIT: E-MERCHANT FEES		Category/ Type 001	Transaction ID : B-2316897	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2160.41
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 Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. SUNRISE DATA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2022		
Mailing Address 20130 LAKEVIEW CENTER PLAZA			FEC Identification Number C		
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 345.00		
Purpose of Disbursement DONOR LISTS		Category/ Type 003	Transaction ID : B-2298729		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SUNRISE DATA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022		
Mailing Address 20130 LAKEVIEW CENTER PLAZA			FEC Identification Number C		
City ASHBURN	State VA	Zip Code 20147	Amount of Each Disbursement this Period 435.41		
Purpose of Disbursement DONOR LISTS		Category/ Type 003	Transaction ID : B-2298690		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. VALDEZ, JOEL, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2022		
Mailing Address 1215 FIRST STREET NORTHEAST APT 10G			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 441.75		
Purpose of Disbursement PAYROLL		Category/ Type 001	Transaction ID : B-2252425		
Candidate Name		<input checked="" type="checkbox"/> Memo Item MEMO: SUBVENDOR OF-GUSTO			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	780.41
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 Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. VALDEZ, JOEL, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2022	
Mailing Address 1215 FIRST STREET NORTHEAST APT 10G			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 441.75	
Purpose of Disbursement PAYROLL		Category/ Type 001	Transaction ID : B-2317040	
Candidate Name		Memo Item MEMO: SUBVENDOR OF-GUSTO		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
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) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
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) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	216644.01

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 74 OF 80
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. CARROLL, FRANK, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 11937 DENTON DR

City DALLAS State TX Zip Code 75234

Purpose of Disbursement REFUND OF CONTRIBUTION Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.00

Transaction ID : B-2311847

Memo Item

B. CARROLL, FRANK, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 11937 DENTON DR

City DALLAS State TX Zip Code 75234

Purpose of Disbursement REFUND OF CONTRIBUTION Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 29 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.00

Transaction ID : B-2311812

Memo Item

C. COX, TAYLOR, , ,

Full Name (Last, First, Middle Initial)
Mailing Address 409 VANDEMERE COURT

City HOLLY RIDGE State NC Zip Code 28445

Purpose of Disbursement REFUND OF CONTRIBUTION Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 100.00

Transaction ID : B-2311792

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 150.00

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 Page

FOR LINE NUMBER: PAGE 75 OF 80
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. COX, TAYLOR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 409 VANDEMERE COURT

City HOLLY RIDGE State NC Zip Code 28445

Purpose of Disbursement REFUND OF CONTRIBUTION Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement 12 / 15 / 2022

FEC Identification Number C

Amount of Each Disbursement this Period 100.00

Transaction ID : B-2311793

Memo Item

B. LAYTON, EVA, , MS.,

Full Name (Last, First, Middle Initial)

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY State NV Zip Code 89703

Purpose of Disbursement REFUND OF CONTRIBUTION Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement 12 / 22 / 2022

FEC Identification Number C

Amount of Each Disbursement this Period 50.00

Transaction ID : B-2311829

Memo Item

C. LAYTON, EVA, , MS.,

Full Name (Last, First, Middle Initial)

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY State NV Zip Code 89703

Purpose of Disbursement REFUND OF CONTRIBUTION Category/Type 010

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement 12 / 22 / 2022

FEC Identification Number C

Amount of Each Disbursement this Period 50.00

Transaction ID : B-2311830

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 200.00

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 Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 80			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. LAYTON, EVA, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022		
Mailing Address 809 BUNKER HILL DRIVE					
City CARSON CITY	State NV	Zip Code 89703	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Amount of Each Disbursement this Period 50.00		
Candidate Name		Transaction ID : B-2311831			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) B. LAYTON, EVA, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022		
Mailing Address 809 BUNKER HILL DRIVE					
City CARSON CITY	State NV	Zip Code 89703	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Amount of Each Disbursement this Period 25.00		
Candidate Name		Transaction ID : B-2311832			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

Full Name (Last, First, Middle Initial) C. LAYTON, EVA, , MS.,			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022		
Mailing Address 809 BUNKER HILL DRIVE					
City CARSON CITY	State NV	Zip Code 89703	FEC Identification Number C		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Amount of Each Disbursement this Period 50.00		
Candidate Name		Transaction ID : B-2311833			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	125.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 80	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. LAYTON, EVA, , MS.,		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022
Mailing Address 809 BUNKER HILL DRIVE		FEC Identification Number C
City CARSON CITY	State NV	Zip Code 89703
Purpose of Disbursement REFUND OF CONTRIBUTION	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2311834 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. LAYTON, EVA, , MS.,		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2022
Mailing Address 809 BUNKER HILL DRIVE		FEC Identification Number C
City CARSON CITY	State NV	Zip Code 89703
Purpose of Disbursement REFUND OF CONTRIBUTION	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 50.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2311835 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. SLAKE, KARL, J., MR,		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022
Mailing Address 208 DORCHESTER AVE APT 1A		FEC Identification Number C
City SYRACUSE	State NY	Zip Code 13203-1419
Purpose of Disbursement REFUND OF CONTRIBUTION	Category/ Type 010	
Candidate Name		Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-2311816 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	375.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 80	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. WALTON, RANDIE, M, MS,			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 1611 N HERMITAGE AVE APT. 205			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60622	Amount of Each Disbursement this Period 45.00	
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : B-2311780	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WALTON, RANDIE, M, MS,			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 1611 N HERMITAGE AVE APT. 205			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60622	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : B-2311794	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WALTON, RANDIE, M, MS,			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022	
Mailing Address 1611 N HERMITAGE AVE APT. 205			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60622	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : B-2311795	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	245.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 80			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

Full Name (Last, First, Middle Initial) A. WALTON, RANDIE, M, ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022		
Mailing Address 1611 N HERMITAGE AVE APT 205			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60622	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : B-2311796		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. WALTON, RANDIE, M, MS,			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2022		
Mailing Address 1611 N HERMITAGE AVE APT. 205			FEC Identification Number C		
City CHICAGO	State IL	Zip Code 60622	Amount of Each Disbursement this Period 30.84		
Purpose of Disbursement REFUND OF CONTRIBUTION		Category/ Type 010	Transaction ID : B-2311797		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
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) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	230.84
TOTAL This Period (last page this line number only).....▶	1325.84

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 80	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF MATT GAETZ

A. FIRST BANKCARD

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2818

City OMAHA State NE Zip Code 68103-2818

Purpose of Disbursement SEE MEMO ITEMS Category/Type 011

Candidate Name LAUREN BOEBERT FOR CONGRESS

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement 11 / 15 / 2022

FEC Identification Number C C00728238

Amount of Each Disbursement this Period 2000.00

Transaction ID : B-2317045

Memo Item

B. LAUREN BOEBERT FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 324

City FORT LUPTON State CO Zip Code 80621

Purpose of Disbursement POLITICAL CONTRIBUTION - PRIMARY Category/Type 011

Candidate Name LAUREN BOEBERT FOR CONGRESS

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement 11 / 15 / 2022

FEC Identification Number C C00728238

Amount of Each Disbursement this Period 2000.00

Transaction ID : B-2317044

Memo Item MEMO: SUBVENDOR OF-FIRST BANKCARD

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00