

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

AARON 4 FL

ADDRESS (number and street)

1180 SPRING CENTRE SOUTH BLVD

STE 320

Check if different
than previously
reported. (ACC)

ALTAMONTE SPRINGS

FL

32776

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00902478

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

06

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer

Williams, Sean, , ,

Signature of Treasurer

Williams, Sean, , ,

Date

M M / D D / Y Y Y Y
07 / 15 / 2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

AARON 4 FL

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

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

	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))....	9812.95	72416.35
(b) Total Contribution Refunds (from Line 20(d))	24.75	3759.75
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	9788.20	68656.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9901.67	68702.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	32.25	332.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	9869.42	68370.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	470.86	
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)	375.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

AARON 4 FL

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

6720.76

24487.76

(ii) Unitemized

3092.19

11927.75

(iii) TOTAL of contributions
from individuals ▶

9812.95

36415.51

(b) Political Party Committees.....

0.00

1500.00

(c) Other Political Committees
(such as PACs)

0.00

34163.08

(d) The Candidate

0.00

337.76

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

9812.95

72416.35

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

375.00

(b) All Other Loans.....

0.00

0.00

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

0.00

375.00

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

32.25

332.25

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)..... ▶

9845.20

73123.60

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9901.67	68702.99
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	24.75	159.75
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	24.75	3759.75
21. OTHER DISBURSEMENTS	0.00	190.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9926.42	72652.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	552.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9845.20
25. SUBTOTAL (add Line 23 and Line 24).....	10397.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9926.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	470.86

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 75

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

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

NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

A.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2026

Transaction ID : SA11AI.6948

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

B.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 13 2026

Transaction ID : SA11AI.6965

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

C.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 13 2026

Transaction ID : SA11AI.6968

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

95.00

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

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

PAGE 6 OF 75

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

A.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3585.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		19		2026

Transaction ID : SA11AI.6970

Amount of Each Receipt this Period

45.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3620.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2026

Transaction ID : SA11AI.6975

Amount of Each Receipt this Period

35.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3665.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		24		2026

Transaction ID : SA11AI.6979

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

125.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

A.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 01 2026

Transaction ID : SA11AI.6987

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

B.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3735.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2026

Transaction ID : SA11AI.7003

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

C.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2026

Transaction ID : SA11AI.7004

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

95.00

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

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

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

A.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2026

Transaction ID : SA11AI.7018

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

B.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 22 2026

Transaction ID : SA11AI.7023

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

C.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3885.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 24 2026

Transaction ID : SA11AI.7027

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

125.00

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

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

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

A.

Mailing Address 2049 isla vista lane

City
NaplesState
FLZip Code
34105FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3920.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		01		2026

Transaction ID : SA11AI.7031

Amount of Each Receipt this Period

35.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

Mailing Address 2049 isla vista lane

City
NaplesState
FLZip Code
34105FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3955.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2026

Transaction ID : SA11AI.7047

Amount of Each Receipt this Period

35.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

Mailing Address 2049 isla vista lane

City
NaplesState
FLZip Code
34105FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3980.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2026

Transaction ID : SA11AI.7052

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

95.00

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

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

Use separate schedule(s)
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PAGE 10 OF 75

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

A.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 19 2026

Transaction ID : SA11AI.7102

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

B.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4060.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 22 2026

Transaction ID : SA11AI.7158

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

blemaster, gary, , ,

C.

Mailing Address 2049 isla vista lane

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 24 2026

Transaction ID : SA11AI.7160

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

125.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 75

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)
Francisco, Kim, , ,

A. Mailing Address 29 Ludlow Lane East

City
Palm Coast

State
FL

Zip Code
32137

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

254.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 17 2026

Transaction ID : SA11AI.7071

Amount of Each Receipt this Period

104.10

☐ Memo Item

Full Name (Last, First, Middle Initial)
Gawne, Mary, , ,

B. Mailing Address 504 Martingale Ln

City
Arnold

State
MD

Zip Code
21012

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 22 2026

Transaction ID : SA11AI.7025

Amount of Each Receipt this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)
hanifil, darren, , ,

C. Mailing Address 4691 Baycliffe Rd

City
Excelsior

State
MN

Zip Code
55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2026

Transaction ID : SA11AI.6949

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

409.35

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 75

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 02 2026

Transaction ID : SA11AI.6951

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3635.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 08 2026

Transaction ID : SA11AI.6954

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 08 2026

Transaction ID : SA11AI.6955

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

115.00

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

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

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Zip Code

55331

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federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 09 2026

Transaction ID : SA11AI.6960

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

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55331

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federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2026

Transaction ID : SA11AI.6961

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

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C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3795.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 19 2026

Transaction ID : SA11AI.6971

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

115.00

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

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55331

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federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3820.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 19 2026

Transaction ID : SA11AI.6972

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

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55331

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federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3865.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 21 2026

Transaction ID : SA11AI.6973

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

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Excelsior

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Zip Code

55331

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federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3910.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 21 2026

Transaction ID : SA11AI.6974

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

115.00

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

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

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Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3955.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 01 2026

Transaction ID : SA11AI.6986

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3980.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 02 2026

Transaction ID : SA11AI.6988

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 08 2026

Transaction ID : SA11AI.6991

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

115.00

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

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4070.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 08 2026

Transaction ID : SA11AI.6992

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4115.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 09 2026

Transaction ID : SA11AI.6995

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 10 2026

Transaction ID : SA11AI.6996

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

115.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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hanifil, darren, , ,

A.

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City

Excelsior

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55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4185.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2026

Transaction ID : SA11AI.7019

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

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State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2026

Transaction ID : SA11AI.7020

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 21 2026

Transaction ID : SA11AI.7021

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

115.00

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:
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PAGE 18 OF 75

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 21 2026

Transaction ID : SA11AI.7022

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 01 2026

Transaction ID : SA11AI.7032

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 02 2026

Transaction ID : SA11AI.7033

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

115.00

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

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City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4415.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 08 2026

Transaction ID : SA11AI.7038

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 08 2026

Transaction ID : SA11AI.7039

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4505.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 09 2026

Transaction ID : SA11AI.7040

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

135.00

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

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

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hanifil, darren, , ,

A.

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City

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MN

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55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 10 2026

Transaction ID : SA11AI.7041

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

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Zip Code

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federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 19 2026

Transaction ID : SA11AI.7103

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

C.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 19 2026

Transaction ID : SA11AI.7104

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

95.00

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

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

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Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

A.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4645.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 21 2026

Transaction ID : SA11AI.7140

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

hanifil, darren, , ,

B.

Mailing Address 4691 Baycliffe Rd

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 21 2026

Transaction ID : SA11AI.7143

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Khan, Tahir, , ,

C.

Mailing Address 12305 Willscott Pl

City

Glen Allen

State

VA

Zip Code

23059

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 14 2026

Transaction ID : SA11AI.7012

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

340.00

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

khan, tariq, , ,

A.

Mailing Address P.O Box 882

City

Matawan

State

NJ

Zip Code

07747

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Real Estate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
05 14 2026

Transaction ID : SA11AI.7010

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Marin, Louis, , ,

B.

Mailing Address 5469 Grove Crossings Blvd

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Realty Investments

Occupation

Realtor

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
05 26 2026

Transaction ID : SA11AI.7030

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McCabe, Shayne, , ,

C.

Mailing Address 4210 Tall Trees Lane

City

St. Augustine

State

FL

Zip Code

32086

FEC ID number of contributing
federal political committee.

C

Name of Employer

RF-SMART

Occupation

Software Engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.20

Date of Receipt

M M / D D / Y Y Y Y
04 25 2026

Transaction ID : SA11AI.6980

Amount of Each Receipt this Period

52.05

☐ Memo Item

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

802.05

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 75

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

McCabe, Shayne, , ,

A.

Mailing Address 4210 Tall Trees Lane

City

St. Augustine

State

FL

Zip Code

32086

FEC ID number of contributing
federal political committee.

C

Name of Employer
RF-SMART

Occupation
Software Engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 25 2026

Transaction ID : SA11AI.7028

Amount of Each Receipt this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

McCabe, Shayne, , ,

B.

Mailing Address 4210 Tall Trees Lane

City

St. Augustine

State

FL

Zip Code

32086

FEC ID number of contributing
federal political committee.

C

Name of Employer
RF-SMART

Occupation
Software Engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

312.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2026

Transaction ID : SA11AI.7166

Amount of Each Receipt this Period

52.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mirza, Khalid, , ,

C.

Mailing Address 13100 Mustang trail

City

Fort Lauderdale

State

FL

Zip Code

33330

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 22 2026

Transaction ID : SA11AI.7155

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

3404.10

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)

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

Smith, David, , ,

A.

Mailing Address 7 Grackle Ln

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

693.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2026

Transaction ID : SA11AI.6950

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Thon, Bryce, , ,

B.

Mailing Address E8784 555th Ave

Lot 123

City

Elk Mound

State

WI

Zip Code

54739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vitacare Senior Living LLC

Occupation

Med Passer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 22 2026

Transaction ID : SA11AI.7159

Amount of Each Receipt this Period

20.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

70.26

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

6720.76

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. 7-11

Mailing Address 31631 SR 44

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2026

City
EustisState
FLZip Code
32736

FEC Identification Number

C C00902478

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

105.32

Transaction ID : SB17.7429

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. 7-11

Mailing Address 31631 SR 44

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2026

City
EustisState
FLZip Code
32736

FEC Identification Number

C C00902478

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.7447

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. A.G.E. Graphics

Mailing Address 678 Collins Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2026

City
Little HockingState
OHZip Code
45742

FEC Identification Number

C C00902478

Purpose of Disbursement
Signage

004

Amount of Each Disbursement this Period

3038.00

Transaction ID : SB17.7455

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional).....▶

3183.32

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

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Amazon

Mailing Address 410 Terry Avenue N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2026

City
SeattleState
WAZip Code
98109

FEC Identification Number

C C00902478

Purpose of Disbursement
Supplies

006

Amount of Each Disbursement this Period

68.47

Transaction ID : SB17.7407

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Avenue N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2026

City
SeattleState
WAZip Code
98109

FEC Identification Number

C C00902478

Purpose of Disbursement
Supplies

006

Amount of Each Disbursement this Period

29.98

Transaction ID : SB17.7458

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2026

City
New OrleansState
LAZip Code
70122

FEC Identification Number

C

Purpose of Disbursement
Fundraising FeesCategory/
Type

Amount of Each Disbursement this Period

2.30

Transaction ID : SB17.7195

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

100.75

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 PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2.30

Transaction ID : SB17.7200

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : SB17.7205

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : SB17.7209

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

10.90

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7216

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7217

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7221

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

3.33

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

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

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7226

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

0.54

Transaction ID : SB17.7229

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

8.30

Transaction ID : SB17.7237

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

9.95

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

8.30

Transaction ID : SB17.7238

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : SB17.7239

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : SB17.7240

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

38.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7241

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2.30

Transaction ID : SB17.7243

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7251

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

4.52

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : SB17.7254

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : SB17.7258

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

2.30

Transaction ID : SB17.7259

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

16.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.30

Transaction ID : SB17.7264

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7265

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : SB17.7312

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

6.91

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.50

Transaction ID : SB17.7313

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70122Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.11

Transaction ID : SB17.7328

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

City
AustinState
TXZip Code
78729Purpose of Disbursement
Digital Advertising

Candidate Name

AARON 4 FL

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

Date of Disbursement

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

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.7393

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

5.61

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2026

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Category/
Type

Amount of Each Disbursement this Period

2.99

Transaction ID : SB17.7396

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2026

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Category/
Type

Amount of Each Disbursement this Period

19.00

Transaction ID : SB17.7397

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2026

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Category/
Type

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.7406

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

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

71.99

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2026

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Amount of Each Disbursement this Period

12.45

Candidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.7420

☐ Memo Item

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2026

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Amount of Each Disbursement this Period

19.92

Candidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.7423

☐ Memo Item

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2026

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Amount of Each Disbursement this Period

3.98

Candidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.7424

☐ Memo Item

State: FL District: 06

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

36.35

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

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

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Category/
Type

Amount of Each Disbursement this Period

2.99

Transaction ID : SB17.7440

☐ Memo ItemCandidate Name
AARON 4 FL

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

Full Name (Last, First, Middle Initial)

B. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

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

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Category/
Type

Amount of Each Disbursement this Period

25.95

Transaction ID : SB17.7441

☐ Memo ItemCandidate Name
AARON 4 FL

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

Full Name (Last, First, Middle Initial)

C. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

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

City
AustinState
TXZip Code
78729

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Digital Advertising

004

Category/
Type

Amount of Each Disbursement this Period

10.97

Transaction ID : SB17.7450

☐ Memo ItemCandidate Name
AARON 4 FL

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

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

39.91

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Apple Payment Services LLC

Mailing Address 6900 W. Palmer Lane

Date of Disbursement

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

City
AustinState
TXZip Code
78729

FEC Identification Number

C C00902478

Purpose of Disbursement
Digital Advertising

004

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.7461

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

Full Name (Last, First, Middle Initial)

B. AT&T Wireless

Mailing Address P.O. Box 6416

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

City
Carol StreamState
ILZip Code
60197

FEC Identification Number

C C00902478

Purpose of Disbursement
Telephone

001

Amount of Each Disbursement this Period

277.11

Transaction ID : SB17.7390

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

Full Name (Last, First, Middle Initial)

C. Atlantic Federated Republican Women's Club Daytona

Mailing Address 1000 S. Beach Street

Date of Disbursement

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

City
DaytonaState
FLZip Code
32114

FEC Identification Number

C

Purpose of Disbursement
Meeting

002

Amount of Each Disbursement this Period

53.52

Transaction ID : SB17.7410

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

380.63

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Baker, Aaron, , ,Mailing Address 1180 SPRING CENTRE SOUTH BLVD
STE 320City
ALTAMONTE SPRINGSState
FLZip Code
32776Purpose of Disbursement
Travel

002

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.7387

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Baker, Aaron, , ,Mailing Address 1180 SPRING CENTRE SOUTH BLVD
STE 320City
ALTAMONTE SPRINGSState
FLZip Code
32776Purpose of Disbursement
Travel

002

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.7388

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Baker, Aaron, , ,Mailing Address 1180 SPRING CENTRE SOUTH BLVD
STE 320City
ALTAMONTE SPRINGSState
FLZip Code
32776

Purpose of Disbursement

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

103.50

Transaction ID : SB17.7421

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

328.50

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Baker, Aaron, , ,Mailing Address 1180 SPRING CENTRE SOUTH BLVD
STE 320City
ALTAMONTE SPRINGSState
FLZip Code
32776Purpose of Disbursement
Meeting

002

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
06 / 17 / 2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.7419

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

City
The VillagesState
FLZip Code
32162Purpose of Disbursement
Travel

002

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
04 / 02 / 2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.7351

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

City
The VillagesState
FLZip Code
32162Purpose of Disbursement
Travel

002

Candidate Name
Baker, Aaron, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
04 / 03 / 2026

FEC Identification Number

C H6FL06324

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.7352

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

130.00

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

60.01

Transaction ID : SB17.7353

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.7354

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
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Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

90.00

Transaction ID : SB17.7362

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: FL District: 06

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

210.01

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

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

City
The VillagesState
FLZip Code
32162

FEC Identification Number

☒ H6FL06324Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

40.01

Transaction ID : SB17.7368

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	6

City
The VillagesState
FLZip Code
32162

FEC Identification Number

☒ H6FL06324Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

50.01

Transaction ID : SB17.7374

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

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

City
The VillagesState
FLZip Code
32162

FEC Identification Number

☒ H6FL06324Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

40.15

Transaction ID : SB17.7377

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

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

130.17

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.7380

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

22.01

Transaction ID : SB17.7395

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

114.97

Transaction ID : SB17.7403

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: FL District: 06

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

156.98

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

SCHEDULE B (FEC Form 3)
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for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

100.02

Transaction ID : SB17.7408

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.7416

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C	H6FL06324
---	-----------

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

31.00

Transaction ID : SB17.7435

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: FL District: 06

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

231.02

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C H6FL06324

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

51.00

Transaction ID : SB17.7438

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C H6FL06324

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

55.95

Transaction ID : SB17.7442

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C H6FL06324

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.7445

☐ Memo ItemCandidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

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

141.95

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C H6FL06324

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

5.78

Candidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.7451

☐ Memo Item

State: FL

District: 06

Full Name (Last, First, Middle Initial)

B. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C H6FL06324

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

103.95

Candidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.7452

☐ Memo Item

State: FL

District: 06

Full Name (Last, First, Middle Initial)

C. Circle K

Mailing Address 8695 SE 165th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2026

City
The VillagesState
FLZip Code
32162

FEC Identification Number

C H6FL06324

Purpose of Disbursement
Travel

002

Amount of Each Disbursement this Period

60.17

Candidate Name
Baker, Aaron, , ,Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID : SB17.7456

☐ Memo Item

State: FL

District: 06

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

169.90

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Flagsimporter

Mailing Address 2080 S Cucamonga Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

City
OntarioState
CAZip Code
91761

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Supplies

006

Amount of Each Disbursement this Period

358.45

Transaction ID : SB17.7413

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. GoDaddyMailing Address 100 S Mill Avenue
Suite 1600

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	6

City
TempeState
AZZip Code
85281

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Website hosting

004

Amount of Each Disbursement this Period

21.99

Transaction ID : SB17.7392

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. GoDaddyMailing Address 100 S Mill Avenue
Suite 1600

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

City
TempeState
AZZip Code
85281

FEC Identification Number

C	C00902478
---	-----------

Purpose of Disbursement
Website hosting

004

Amount of Each Disbursement this Period

59.94

Transaction ID : SB17.7415

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

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

440.38

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. GoDaddyMailing Address 100 S Mill Avenue
Suite 1600City
TempeState
AZZip Code
85281Purpose of Disbursement
Website hosting

004

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
06 / 04 / 2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

21.99

Transaction ID : SB17.7427

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lake Federated Republican Women's Club

Mailing Address 4444 Florida National Drive

City
LakelandState
FLZip Code
33813Purpose of Disbursement
Petitions

005

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
05 / 29 / 2026

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.7530

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailchimp

Mailing Address 405 N Angier Ave NE

City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Billboard Advertising

004

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
04 / 17 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

135.00

Transaction ID : SB17.7363

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

406.99

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. Mailchimp

Mailing Address 405 N Angier Ave NE

City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Billboard Advertising

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

135.00

Transaction ID : SB17.7398

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailchimp

Mailing Address 405 N Angier Ave NE

City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Billboard Advertising

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

262.50

Transaction ID : SB17.7444

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Political Matrix

Mailing Address 40 Rolling Sands Drive

City
Palm CoastState
FLZip Code
32164Purpose of Disbursement
Fundraising

003

Candidate Name

AARON 4 FL

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	6

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

102.90

Transaction ID : SB17.7449

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

500.40

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. St Johns County SOE

Mailing Address 4455 Avenue A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2026

City
St AugustineState
FLZip Code
32095

FEC Identification Number

C C00902478

Purpose of Disbursement
Petitions

005

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.7538

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

B. St Johns County SOE

Mailing Address 4455 Avenue A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2026

City
St AugustineState
FLZip Code
32095

FEC Identification Number

C C00902478

Purpose of Disbursement
Petitions

005

Amount of Each Disbursement this Period

3.10

Transaction ID : SB17.7473

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

Full Name (Last, First, Middle Initial)

C. St Johns County SOE

Mailing Address 4455 Avenue A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2026

City
St AugustineState
FLZip Code
32095

FEC Identification Number

C C00902478

Purpose of Disbursement
Petitions

005

Amount of Each Disbursement this Period

8.80

Transaction ID : SB17.7519

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

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

21.90

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 24106 SR 46

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2026

City
SorrentoState
FLZip Code
32776Purpose of Disbursement
Postage

001

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

10.92

Transaction ID : SB17.7386

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 24106 SR 46

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2026

City
SorrentoState
FLZip Code
32776Purpose of Disbursement
Postage

001

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

4.19

Transaction ID : SB17.7394

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 24106 SR 46

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2026

City
SorrentoState
FLZip Code
32776Purpose of Disbursement
Postage

001

Candidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 06

FEC Identification Number

C C00902478

Amount of Each Disbursement this Period

6.08

Transaction ID : SB17.7412

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

21.19

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 24106 SR 46

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2026

City
SorrentoState
FLZip Code
32776

FEC Identification Number

C C00902478

Purpose of Disbursement
Postage

001

Amount of Each Disbursement this Period

35.90

Transaction ID : SB17.7430

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼**B. Vail Printing and Signs LLC**Mailing Address 13900 CR 455
Ste 107-337

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2026

City
ClermontState
FLZip Code
34711

FEC Identification Number

C C00902478

Purpose of Disbursement
Printing

004

Amount of Each Disbursement this Period

267.50

Transaction ID : SB17.7405

☐ Memo ItemCandidate Name
AARON 4 FLCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 06Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼**C. WinRed**Mailing Address 1776 Wilson Blvd
Ste 530

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2026

City
ArlingtonState
VAZip Code
22209

FEC Identification Number

C

Purpose of Disbursement
Fundraising FeesCategory/
Type

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7277

☐ Memo Item

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional).....▶

327.01

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7278

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7279

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

14.51

Transaction ID : SB17.7280

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

61.73

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.63

Transaction ID : SB17.7281

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7282

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7283

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

50.85

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7284

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7285

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7286

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

70.83

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7287

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7288

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7289

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

70.83

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7290

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7291

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7292

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

70.83

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

47.22

Transaction ID : SB17.7293

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7294

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7295

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

94.44

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1.77

Transaction ID : SB17.7296

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1.77

Transaction ID : SB17.7297

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : SB17.7298

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

4.53

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB17.7299

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7300

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7301

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

47.26

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7302

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7303

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7304

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

70.83

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

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7305

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7306

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7307

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

70.83

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

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7308

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7309

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7310

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

70.83

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7311

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7314

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.24

Transaction ID : SB17.7315

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

47.46

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7316

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.77

Transaction ID : SB17.7317

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7318

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

48.99

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.77

Transaction ID : SB17.7319

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.22

Transaction ID : SB17.7320

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.12

Transaction ID : SB17.7321

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

49.11

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.22

Transaction ID : SB17.7322

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7323

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7324

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

94.44

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

130.02

Transaction ID : SB17.7325

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7326

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.38

Transaction ID : SB17.7327

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

155.01

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.77

Transaction ID : SB17.7329

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.97

Transaction ID : SB17.7330

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7331

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

32.35

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.86

Transaction ID : SB17.7332

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.05

Transaction ID : SB17.7333

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.86

Transaction ID : SB17.7334

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

51.77

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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ArlingtonState
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22209Purpose of Disbursement
Fundraising Fees

Candidate Name

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☐	House
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☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.86

Transaction ID : SB17.7335

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.88

Transaction ID : SB17.7336

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

51.75

Transaction ID : SB17.7337

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

102.49

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.86

Transaction ID : SB17.7338

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.88

Transaction ID : SB17.7339

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.22

Transaction ID : SB17.7340

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

97.96

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7341

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.61

Transaction ID : SB17.7342

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.88

Transaction ID : SB17.7343

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

73.10

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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AARON 4 FL

Full Name (Last, First, Middle Initial)

A. WinRedMailing Address 1776 Wilson Blvd
Ste 530City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.94

Transaction ID : SB17.7344

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

0.94

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

8563.78

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 75 OF 75

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4163

AARON 4 FL

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Baker, Aaron, , ,

Mailing Address

1180 SPRING CENTRE SOUTH BLVD
STE 320

City

ALTAMONTE SPRINGS

State

FL

ZIP Code

32776

☒ Personal Funds of the Candidate

Original Amount of Loan

375.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

375.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 05 / 2025

M M / D D / Y Y Y Y

12/31/2026

2.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

375.00

TOTALS This Period (last page in this line only).....▶

375.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.