



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**FLORIDA FIREBRAND PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>		36773.98
(b) Cash on Hand at Beginning of Reporting Period.....	36773.98	
(c) Total Receipts (from Line 19) .....	1277.11	1277.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	38051.09	38051.09
7. Total Disbursements (from Line 31).....	4575.00	4575.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	33476.09	33476.09
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	36315.74	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**FLORIDA FIREBRAND PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1277.11	1277.11
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1277.11	1277.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1277.11	1277.11

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4575.00	4575.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4575.00	4575.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4575.00	4575.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4575.00	4575.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4575.00	4575.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4575.00	4575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 9
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**FLORIDA FIREBRAND PAC**

**A. Conrad Direct**

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

Mailing Address 800 Kinderkamack Rd  
Suite 307

City North Oradell State NJ Zip Code 07649

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
489.34

Date of Receipt  
MM / DD / YYYY  
02 / 03 / 2026

**Transaction ID : SA17.4107**

Amount of Each Receipt this Period  
489.34

Memo Item  
List Rental Income

**B. Conrad Direct**

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

Mailing Address 800 Kinderkamack Rd  
Suite 307

City North Oradell State NJ Zip Code 07649

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1277.11

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2026

**Transaction ID : SA17.4108**

Amount of Each Receipt this Period  
787.77

Memo Item  
List Rental Income

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1277.11
<b>TOTAL</b> This Period (last page this line number only).....▶	1277.11

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FLORIDA FIREBRAND PAC**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. CFS Compliance</b>		MM / DD / YYYY 01 / 08 / 2026	
Mailing Address PO Box 30844		FEC Identification Number	
City Bethesda	State MD	Zip Code 20824	C [REDACTED]
Purpose of Disbursement Compliance Consulting		Category/ Type 001	<b>Transaction ID : SB21B.4100</b>
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[REDACTED] 1525.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. CFS Compliance</b>		MM / DD / YYYY 02 / 09 / 2026	
Mailing Address PO Box 30844		FEC Identification Number	
City Bethesda	State MD	Zip Code 20824	C [REDACTED]
Purpose of Disbursement Compliance Consulting		Category/ Type 001	<b>Transaction ID : SB21B.4102</b>
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[REDACTED] 1525.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. CFS Compliance</b>		MM / DD / YYYY 03 / 09 / 2026	
Mailing Address PO Box 30844		FEC Identification Number	
City Bethesda	State MD	Zip Code 20824	C [REDACTED]
Purpose of Disbursement Compliance Consulting		Category/ Type 001	<b>Transaction ID : SB21B.4103</b>
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[REDACTED] 1525.00	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 4575.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 4575.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 9
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FLORIDA FIREBRAND PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HSP Direct</b>			Nature of Debt (Purpose): Direct Mail
Mailing Address 20130 Lakeview Center Plaza Suite 300			
City Ashburn	State VA	Zip Code 20147	

Outstanding Balance Beginning This Period <input type="text" value="4600.00"/>	<b>Transaction ID : SD10.4115</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4600.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TAG LLC</b>			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address PO Box 1243			
City Alexandria	State VA	Zip Code 22313	

Outstanding Balance Beginning This Period <input type="text" value="11425.30"/>	<b>Transaction ID : SD10.4114</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11425.30"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TAG LLC</b>			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address PO Box 1243			
City Alexandria	State VA	Zip Code 22313	

Outstanding Balance Beginning This Period <input type="text" value="10892.82"/>	<b>Transaction ID : SD10.4118</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10892.82"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="26918.12"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 9
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**FLORIDA FIREBRAND PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TAG LLC</b>			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address PO Box 1243			
City Alexandria	State VA	Zip Code 22313	

Outstanding Balance Beginning This Period 9397.62		<b>Transaction ID : SD10.4119</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9397.62	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9397.62
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	36315.74
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	36315.74