

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Republican Party of Florida
FEC IDENTIFICATION NUMBER
C C00099259

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

Full Name of Payee: Bill Nelson For U S Senate
Mailing Address: 972 W Whitmire Dr
City: Melbourne, State: FL, Zip Code: 32935-6972
Purpose of Expenditure: domain name - retirenelson.org
Category/Type:
Date of Public Distribution/Dissemination: 04/05/2018
Amount: 74.10
Transaction ID: EDEFA92A4FD21434DA3A
Date of Disbursement or Obligation:

Name of Federal Candidate: Nelson, Bill, ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, State: FL
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

Full Name of Payee: Bill Nelson For U S Senate
Mailing Address: 972 W Whitmire Dr
City: Melbourne, State: FL, Zip Code: 32935-6972
Purpose of Expenditure: website service
Category/Type:
Date of Public Distribution/Dissemination: 04/05/2018
Amount: 500.00
Transaction ID: E0E4A55BE2082499FB49
Date of Disbursement or Obligation:

Name of Federal Candidate: Nelson, Bill, ,
Support: [], Oppose: [x]
Office Sought: [] House, [x] Senate, State: FL
Disbursement For: [] Primary, [x] General 2018, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 590.26

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Moberley, Mike, ,
Signature

[Electronically Filed]

Date: 06/19/2018