

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Friends of Bill Posey

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	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))	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4409.54	109671.86
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	12760.37
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4409.54	96911.49
8. Cash on Hand at Close of Reporting Period (from Line 27)	42886.20	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact 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

Friends of Bill Posey

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 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).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	12760.37
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	535.94
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	13296.31

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.....	4409.54	109671.86
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	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	3525.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4409.54	113196.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	47295.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	47295.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4409.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	42886.20

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 10			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. AT&T			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2026
Mailing Address P. O. Box 105251			FEC Identification Number C
City Atlanta	State GA	Zip Code 30348	Amount of Each Disbursement this Period 373.52
Purpose of Disbursement telephone		Category/ Type	Transaction ID : SB17.4122
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Posey, Katie, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2026
Mailing Address 1803 Hensley Drive			FEC Identification Number C
City Rockledge	State FL	Zip Code 32955	Amount of Each Disbursement this Period 886.30
Purpose of Disbursement 2025 mileage		Category/ Type	Transaction ID : SB17.4121
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Robert Watkins & Company, P.A.			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2026
Mailing Address 610 S. Boulevard			FEC Identification Number C
City Tampa	State FL	Zip Code 33606	Amount of Each Disbursement this Period 712.38
Purpose of Disbursement accounting services		Category/ Type	Transaction ID : SB17.4118
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1972.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Robert Watkins & Company, P.A.		Date of Disbursement MM / DD / YYYY 02 / 05 / 2026
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 1472.55
Candidate Name		Transaction ID : SB17.4131
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Robert Watkins & Company, P.A.		Date of Disbursement MM / DD / YYYY 03 / 13 / 2026
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 155.00
Candidate Name		Transaction ID : SB17.4136
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. United States Treasury		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address P. O. Box 105083		FEC Identification Number C
City Atlanta	State GA	Zip Code 30348
Purpose of Disbursement payroll taxes		Amount of Each Disbursement this Period 36.00
Candidate Name		Transaction ID : SB17.4119
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1663.55
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 10	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Visa		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2026
Mailing Address P. O. Box 6818		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 92.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4123
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2026
Mailing Address 1600 Amphitheatre Way		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement software	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 92.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4123.0
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Visa		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2026
Mailing Address P. O. Box 6818		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 80.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4124
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	172.84
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 10	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Visa

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 6818

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 27 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 294.14

Transaction ID : SB17.4125

Memo Item

B. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 105251

City Atlanta State GA Zip Code 30348

Purpose of Disbursement telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 09 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 144.15

Transaction ID : SB17.4125.0

Memo Item

C. McAfee

Full Name (Last, First, Middle Initial)

Mailing Address 2821 Mission College Blvd.

City Santa Clara State CA Zip Code 95054

Purpose of Disbursement software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 09 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 149.99

Transaction ID : SB17.4125.1

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 294.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 10			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Visa		Date of Disbursement MM / DD / YYYY 02 / 25 / 2026
Mailing Address P. O. Box 6818		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 129.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4132
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Microsoft		Date of Disbursement MM / DD / YYYY 02 / 02 / 2026
Mailing Address 1 Microsoft Way		FEC Identification Number C
City Redmond	State WA	Zip Code 98052
Purpose of Disbursement software	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 129.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4132.0
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Visa		Date of Disbursement MM / DD / YYYY 02 / 25 / 2026
Mailing Address P. O. Box 6818		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 26.82	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4133
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	156.81
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 10	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

Full Name (Last, First, Middle Initial) A. Google			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2026	
Mailing Address 1600 Amphitheatre Way			FEC Identification Number C	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period 26.82	
Purpose of Disbursement software		Category/ Type	Transaction ID : SB17.4133.0	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Visa			Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2026	
Mailing Address P. O. Box 6818			FEC Identification Number C	
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period 72.00	
Purpose of Disbursement credit card payment		Category/ Type	Transaction ID : SB17.4137	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	72.00
TOTAL This Period (last page this line number only).....▶	4331.54