

**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.

1 2 F E 4 M 5

RICK SCOTT FOR FLORIDA

ADDRESS (number and street)

PO BOX 130708

Check if different  
than previously  
reported. (ACC)

TAMPA

FL

33681

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00676965

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

FL

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

01

D D / Y Y Y Y

01

Y Y Y Y

2025

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2025

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

PURPURA, SALVATORE, A, MR,

Signature of Treasurer

PURPURA, SALVATORE, A, MR,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2025

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

**RICK SCOTT FOR FLORIDA**

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025

	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)) ....	186340.90	341513.02
(b) Total Contribution Refunds (from Line 20(d)) .....	10000.00	25137.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	176340.90	316376.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	310892.97	1126071.83
(b) Total Offsets to Operating Expenditures (from Line 14) .....	30259.98	32316.22
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	280632.99	1093755.61
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	833151.20	
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) .....	24138834.00	

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

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

RICK SCOTT FOR FLORIDA

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025**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).....

88778.02

156280.68

(ii) Unitemized .....

71571.21

102098.50

(iii) TOTAL of contributions  
from individuals ▶

160349.23

258379.18

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

0.00

14597.00

(d) The Candidate .....

25991.67

68536.84

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

186340.90

341513.02

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

137912.77

949922.99

## 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.) .....

30259.98

32316.22

15. OTHER RECEIPTS  
(Dividends, Interest, etc.) .....

1166.95

1893.62

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

355680.60

1325645.85

# **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.....	310892.97	1126071.83
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 .....	10000.00	25137.00
(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)).....	10000.00	25137.00
21. OTHER DISBURSEMENTS .....	0.00	2960.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	320892.97	1154168.83

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	798363.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	355680.60
25. SUBTOTAL (add Line 23 and Line 24).....	1154044.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	320892.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	833151.20

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

PAGE 5 OF 316

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ANGLETON, MARINA, , MS.,

**A.**

Mailing Address 13000 ARCH CREEK TERRACE

City

NORTH MIAMI

State

FL

Zip Code

33181-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 02 2025

Transaction ID : SA11A.559335

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

SEE REDESIGNATION

**B.**

Full Name (Last, First, Middle Initial)

ANGLETON, MARINA, , MS.,

Mailing Address 13000 ARCH CREEK TERRACE

City

NORTH MIAMI

State

FL

Zip Code

33181-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 02 2025

Transaction ID : SA11A.559337

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

**C.**

Full Name (Last, First, Middle Initial)

ANGLETON, MARINA, , MS.,

Mailing Address 13000 ARCH CREEK TERRACE

City

NORTH MIAMI

State

FL

Zip Code

33181-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 02 2025

Transaction ID : SA11A.559338

Amount of Each Receipt this Period

1700.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

**A.**

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

294.48

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : SA11A.568084

Amount of Each Receipt this Period

- 4.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.**

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

294.48

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : SA11A.568085

Amount of Each Receipt this Period

- 1.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**C.**

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

294.48

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : SA11A.568086

Amount of Each Receipt this Period

- 1.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

- 6.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

COHN, MORTON, A., ,

**A.**

Mailing Address 800 BERING DR, STE 210

City  
HOUSTONState  
TXZip Code  
77057-2130FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MORTON COHN INVESTMENTSOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA11A.568432

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

SEE REDESIGNATION

**B.**

Full Name (Last, First, Middle Initial)

COHN, MORTON, A., ,

Mailing Address 800 BERING DR, STE 210

City  
HOUSTONState  
TXZip Code  
77057-2130FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MORTON COHN INVESTMENTSOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA11A.568432

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

**C.**

Full Name (Last, First, Middle Initial)

COHN, MORTON, A., ,

Mailing Address 800 BERING DR, STE 210

City  
HOUSTONState  
TXZip Code  
77057-2130FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MORTON COHN INVESTMENTSOccupation  
OWNER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA11A.568434

Amount of Each Receipt this Period

1500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

COOK, CHARLES, , MR.,

**A.**

Mailing Address 31 OCEAN REEF DR C101-194

City

KEY LARGO

State

FL

Zip Code

33037-5282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 19 2025

Transaction ID : SA11A.560412

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

COOK, CHARLES, , MR.,

**B.**

Mailing Address 31 OCEAN REEF DR C101-194

City

KEY LARGO

State

FL

Zip Code

33037-5282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.564465

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

COOK, CHARLES, , MR.,

**C.**

Mailing Address 31 OCEAN REEF DR C101-194

City

KEY LARGO

State

FL

Zip Code

33037-5282

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 19 2025

Transaction ID : SA11A.566846

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

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

150.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

EBERLE, MICHICO, , ,

**A.**

Mailing Address 776 BATEMAN BRANCH ROAD

City  
ERINState  
TNZip Code  
37061-4507FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

296.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.559849

Amount of Each Receipt this Period

- 1.90

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.**

Full Name (Last, First, Middle Initial)

GRAMMIG, LAUREL, LENFESTEY, MRS.,

Mailing Address 21 BAHAMA CIRCLE

City  
TAMPAState  
FLZip Code  
33606-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564120

Amount of Each Receipt this Period

7000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

**C.**

Full Name (Last, First, Middle Initial)

GRAMMIG, LAUREL, LENFESTEY, MRS.,

Mailing Address 21 BAHAMA CIRCLE

City  
TAMPAState  
FLZip Code  
33606-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564124

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

6998.10

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

PAGE 10 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

GRAMMIG, LAUREL, LENFESTEY, MRS.,

A. Mailing Address 21 BAHAMA CIRCLE

City  
TAMPAState  
FLZip Code  
33606-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564125

Amount of Each Receipt this Period

3500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)  
GRAMMIG, ROBERT, J., MR.,

Mailing Address 21 BAHAMA CIRCLE

City  
TAMPAState  
FLZip Code  
33606-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOLLAND & KNIGHT LLPOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564121

Amount of Each Receipt this Period

7000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)  
GRAMMIG, ROBERT, J., MR.,

Mailing Address 21 BAHAMA CIRCLE

City  
TAMPAState  
FLZip Code  
33606-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOLLAND & KNIGHT LLPOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564122

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

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

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 316

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

GRAMMIG, ROBERT, J., MR.,

**A.** Mailing Address 21 BAHAMA CIRCLECity  
TAMPAState  
FLZip Code  
33606-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOLLAND & KNIGHT LLPOccupation  
ATTORNEY

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564123

Amount of Each Receipt this Period

3500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
HARLAN, GARY, , ,  
Mailing Address 4760 TAMIAMI TR #1City  
NAPLESState  
FLZip Code  
34103-3065FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NCOLOR SALONOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 16 2025

Transaction ID : SA11A.560386

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
HARLAN, GARY, , ,  
Mailing Address 4760 TAMIAMI TR #1City  
NAPLESState  
FLZip Code  
34103-3065FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NCOLOR SALONOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.560388

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

5000.00

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

PAGE 12 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

HARLAN, GARY, , ,

**A.** Mailing Address 4760 TAMIAMI TR #1City  
NAPLESState  
FLZip Code  
34103-3065FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NCOLOR SALONOccupation  
OWNER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.560389

Amount of Each Receipt this Period

1700.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

HIRSCH, CARLTON, , ,

**B.** Mailing Address 7377 SCOTLAND WAY, UNIT 6301City  
SARASOTAState  
FLZip Code  
34238-8552FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

443.54

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 03 2025

Transaction ID : SA11A.563263

Amount of Each Receipt this Period

- 0.50

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

Full Name (Last, First, Middle Initial)

HRUZA, VIRGINIA, , ,

**C.** Mailing Address 1 WALKING DIAMOND DR.City  
PRESCOTTState  
AZZip Code  
86301-6160FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : SA11A.568081

Amount of Each Receipt this Period

- 10.00

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

- 10.50

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

PAGE 13 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MUELLER, CHRISTINE, , MS.,

**A.** Mailing Address 1743 BOULDER DRIVECity  
DARIENState  
ILZip Code  
60561-5922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.559840

Amount of Each Receipt this Period

- 3.00

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.** Full Name (Last, First, Middle Initial)  
MUELLER, CHRISTINE, , MS.,  
Mailing Address 1743 BOULDER DRIVECity  
DARIENState  
ILZip Code  
60561-5922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.559841

Amount of Each Receipt this Period

- 2.00

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**C.** Full Name (Last, First, Middle Initial)  
MUELLER, CHRISTINE, , MS.,  
Mailing Address 1743 BOULDER DRIVECity  
DARIENState  
ILZip Code  
60561-5922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.559842

Amount of Each Receipt this Period

- 1.00

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

- 6.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MUELLER, CHRISTINE, , MS.,

**A.**

Mailing Address 1743 BOULDER DRIVE

City

DARIEN

State

IL

Zip Code

60561-5922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.559843

Amount of Each Receipt this Period

- 1.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.564452

Amount of Each Receipt this Period

- 25.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**C.**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.564453

Amount of Each Receipt this Period

- 20.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

- 46.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PETKAS, JAMES, M., MR.,

**A.**

Mailing Address 13000 ARCH CREEK TER

City

NORTH MIAMI

State

FL

Zip Code

33181-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS OWNER

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.559336

Amount of Each Receipt this Period

5000.00



Memo Item

CONTRIBUTION

SEE REDESIGNATION

**B.**

Full Name (Last, First, Middle Initial)

PETKAS, JAMES, M., MR.,

Mailing Address 13000 ARCH CREEK TER

City

NORTH MIAMI

State

FL

Zip Code

33181-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS OWNER

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.559339

Amount of Each Receipt this Period

- 1700.00



Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

**C.**

Full Name (Last, First, Middle Initial)

PETKAS, JAMES, M., MR.,

Mailing Address 13000 ARCH CREEK TER

City

NORTH MIAMI

State

FL

Zip Code

33181-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS OWNER

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.559340

Amount of Each Receipt this Period

1700.00



Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.** Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

Transaction ID : SA11A.561395

Amount of Each Receipt this Period

- 25.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA11A.565217

Amount of Each Receipt this Period

- 50.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**C.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA11A.565218

Amount of Each Receipt this Period

- 5.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

- 80.00



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

PAGE 17 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.** Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA11A.565219

Amount of Each Receipt this Period

- 25.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA11A.565220

Amount of Each Receipt this Period

- 5.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**C.** Full Name (Last, First, Middle Initial)  
UREN, THOMAS, J., MR.,  
Mailing Address P.O. BOX 411

City

FAIRFAX

State

MN

Zip Code

55332-0411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2030

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	2	5

Transaction ID : SA11A.568978

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

220.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ZENOS, MARIA, E., MRS.,

A.

Mailing Address 17344 SOUTHWEST 88TH AVENUE

City  
MIAMIState  
FLZip Code  
33157-4535FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 09 2025

Transaction ID : SA11A.559877

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

REFUNDED \$10,000.00 ON 01/10/2025

B.

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS PAC (EARMARKS)

Mailing Address 430 NORTH MICHIGAN AVENUE

City  
CHICAGOState  
ILZip Code  
60611-4011FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 26 2025

Transaction ID : SA11C.565249

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTIONNAR EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD

C.

Full Name (Last, First, Middle Initial)

DEFRIES, ANN, , MS.,

Mailing Address 905 SOUTHEAST 12TH STREET

City  
DEERFIELD BEACHState  
FLZip Code  
33441-7020FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CENTURY 21 HANSEN REALTYOccupation  
REALTOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565250

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION  
NAR EARMARKED

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

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

10500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 316

(check only one)

☒ 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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**SENATE CONSERVATIVES FUND EARMARKS**

**A.**

Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.

**C** C00448696

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 21 2025

Transaction ID : SA11C.560675

Amount of Each Receipt this Period

640.00

☒ Memo Item  
CONTRIBUTION

SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B.**

Full Name (Last, First, Middle Initial)

**HOOPER, JIM, , MR.,**

Mailing Address 2142 ERIN AVE

City

UPLAND

State

CA

Zip Code

91784-1281

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 15 2025

Transaction ID : SA11A.560719

Amount of Each Receipt this Period

89.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

**C.**

Full Name (Last, First, Middle Initial)

**KOMADA, ANNA, , MS.,**

Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 15 2025

Transaction ID : SA11A.560711

Amount of Each Receipt this Period

16.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

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

105.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**SENATE CONSERVATIVES FUND EARMARKS**

**A.**

Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.

**C** C00448696

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 28 2025

**Transaction ID : SA11C.561400**

Amount of Each Receipt this Period

562.00

☒ Memo Item  
CONTRIBUTION

SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

**SCOTT, JOHN, D., MR.,**

**B.**

Mailing Address P.O. BOX 66

City

LAKE DELTON

State

WI

Zip Code

53940-0066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

SCOTT CONSTRUCTION

Occupation

EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

**Transaction ID : SA11A.561403**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

**SENATE CONSERVATIVES FUND EARMARKS**

**C.**

Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.

**C** C00448696

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 18 2025

**Transaction ID : SA11C.564457**

Amount of Each Receipt this Period

263.00

☒ Memo Item  
CONTRIBUTION

SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

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

500.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KOETHER, BERNARD, BEN, MR., II

**A.**

Mailing Address 757 SE 17TH ST PMB 1074

City

FORT LAUDERDALE

State

FL

Zip Code

33316-2960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		11		2025

Transaction ID : SA11A.564461

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**B.**

Full Name (Last, First, Middle Initial)

SENATE CONSERVATIVES FUND EARMARKS

Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.

C C00448696

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		25		2025

Transaction ID : SA11C.565234

Amount of Each Receipt this Period

606.00

☒ Memo Item  
 CONTRIBUTION
SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD**C.**

Full Name (Last, First, Middle Initial)

SCOTT, JOHN, D., MR.,

Mailing Address P.O. BOX 66

City

LAKE DELTON

State

WI

Zip Code

53940-0066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCOTT CONSTRUCTION

Occupation

EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		22		2025

Transaction ID : SA11A.565238

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

700.00
--------

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**SENATE CONSERVATIVES FUND EARMARKS****A.**

Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.**C** C00448696

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

Transaction ID : SA11C.565750

Amount of Each Receipt this Period

354.50

☒ Memo Item

CONTRIBUTION

SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD**B.**

Full Name (Last, First, Middle Initial)

**NIEMANN, NANCY, A., MS.,**

Mailing Address 18 DOGWOOD ROAD

City

MORRIS PLAINS

State

NJ

Zip Code

07950-1919

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

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.00

Date of Receipt

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

Transaction ID : SA11A.565754

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**C.**

Full Name (Last, First, Middle Initial)

**SENATE CONSERVATIVES FUND EARMARKS**

Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.**C** C00448696

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	5

Transaction ID : SA11C.567594

Amount of Each Receipt this Period

6865.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

20.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BARGE, CHARLES, RICHARD, MR.,

**A.** Mailing Address 706 MAGNOLIA DRCity  
MACONState  
MSZip Code  
39341-2090FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BARGE FOREST PRODUCTS COOccupation  
MANAGEMENT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 14 2025

Transaction ID : SA11A.568048

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**B.** Full Name (Last, First, Middle Initial)  
HUDSON, MARJORIE, A., MRS.,Mailing Address 1010 NE PURCELL BLVD  
APT 322City  
BENDState  
ORZip Code  
97701-5081FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 14 2025

Transaction ID : SA11A.568004

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**C.** Full Name (Last, First, Middle Initial)  
MILES, JUANITA, R., MRS.,

Mailing Address 12035 HAZELHURST DR

City  
CINCINNATIState  
OHZip Code  
45240-1237FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 14 2025

Transaction ID : SA11A.567990

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1045.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NIEMANN, NANCY, A., MS.,

**A.**

Mailing Address 18 DOGWOOD ROAD

City

MORRIS PLAINS

State

NJ

Zip Code

07950-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.568047

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**B.**

Full Name (Last, First, Middle Initial)

QUILHOT, JEANETTE, S., MRS.,

Mailing Address 9464 S 700 E-92

City

ROANOKE

State

IN

Zip Code

46783-9245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 14 2025

Transaction ID : SA11A.568046

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**C.**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, ENGEL, MR.,

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107-3721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART, PLLC

Occupation

ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 14 2025

Transaction ID : SA11A.568021

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

800.00

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



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

Use separate schedule(s)  
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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, ENGEL, MR.,

**A.** Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107-3721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART, PLLC

Occupation

ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.568031

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

THOMPSON, SHIRLEY, E., MS.,

**B.** Mailing Address 3900 S TERRY AVE  
APT 106

City

SIOUX FALLS

State

SD

Zip Code

57106-5001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.567855

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

SENATE CONSERVATIVES FUND EARMARKS

**C.** Mailing Address 300 INDEPENDENCE AVE. SE

City

WASHINGTON

State

DC

Zip Code

20003-1021

FEC ID number of contributing  
federal political committee.

C

C00448696

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 25 2025

Transaction ID : SA11C.568441

Amount of Each Receipt this Period

871.00

☒ Memo Item

CONTRIBUTION

SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD

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

55.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

HOOPER, JIM, , MR.,

**A.**

Mailing Address 2142 ERIN AVE

City  
UPLAND

State  
CA

Zip Code  
91784-1281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2025

Transaction ID : SA11A.568452

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

SCOTT, JOHN, D., MR.,

**B.**

Mailing Address P.O. BOX 66

City  
LAKE DELTON

State  
WI

Zip Code  
53940-0066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCOTT CONSTRUCTION

Occupation  
EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 23 2025

Transaction ID : SA11A.568453

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

SENATE CONSERVATIVES FUND EARMARKS

**C.**

Mailing Address 300 INDEPENDENCE AVE. SE

City  
WASHINGTON

State  
DC

Zip Code  
20003-1021

FEC ID number of contributing  
federal political committee.

C C00448696

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19984.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2025

Transaction ID : SA11C.568794

Amount of Each Receipt this Period

3082.00

☒ Memo Item  
CONTRIBUTION

SCF EARMARKED; SEE ATTRIBUTION BELOW FOR  
ALL DONORS ABOVE ITEMIZATION THRESHOLD

750.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CHRISTIAN, SUSAN, A., MS.,

**A.**

Mailing Address 2828 ASH MILL RD

City

DOYLESTOWN

State

PA

Zip Code

18902-1931

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

203.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : SA11A.568855

Amount of Each Receipt this Period

3.00

☐ Memo Item  
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**B.**

Full Name (Last, First, Middle Initial)

KOETHER, BERNARD, BEN, MR., II

Mailing Address 757 SE 17TH ST PMB 1074

City

FORT LAUDERDALE

State

FL

Zip Code

33316-2960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : SA11A.568932

Amount of Each Receipt this Period

200.00

☐ Memo Item  
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**C.**

Full Name (Last, First, Middle Initial)

KOMADA, ANNA, , MS.,

Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	5

Transaction ID : SA11A.568944

Amount of Each Receipt this Period

5.00

☐ Memo Item  
 CONTRIBUTION
EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCOTT, JOHN, D., MR.,

**A.**

Mailing Address P.O. BOX 66

City

LAKE DELTON

State

WI

Zip Code

53940-0066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCOTT CONSTRUCTION

Occupation

EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2025

Transaction ID : SA11A.568895

Amount of Each Receipt this Period

300.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

WEST, STACEY, H., MR.,

**B.**

Mailing Address 246 PINK HOUSE RD

City

SEWICKLEY

State

PA

Zip Code

15143-9455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : SA11A.568952

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM SENATE CONSERVATIVES  
FUND EARMARKS

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 06 2025

Transaction ID : SA11C.559534

Amount of Each Receipt this Period

8483.43

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

550.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BRYANT, MARY, D., MS.,

**A.**

Mailing Address 1700 PARK SHORE RD

City

LA GRANGE

State

KY

Zip Code

40031-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		30		2024

Transaction ID : SA11A.559787

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

CANTRELL, JOHN, , MR.,

Mailing Address 433 HARRISON AVE

City

PANAMA CITY

State

FL

Zip Code

32401-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2024

Transaction ID : SA11A.559690

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		31		2024

Transaction ID : SA11A.559661

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

130.99

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**A.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2024

Transaction ID : SA11A.559761

Amount of Each Receipt this Period

20.25

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

DOD, ROBERT, , ,

Mailing Address 114 CHURCH STREET

City

BRISTOL

State

RI

Zip Code

02809-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		02		2025

Transaction ID : SA11A.559699

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

DOD, ROBERT, , ,

Mailing Address 114 CHURCH STREET

City

BRISTOL

State

RI

Zip Code

02809-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		21		2025

Transaction ID : SA11A.568069

Amount of Each Receipt this Period

- 250.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

20.25

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**A.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
RANCHER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

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

Transaction ID : SA11A.559754

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

HASSE, GLENN, W., MR., JR.

Mailing Address 3415 FORT CHARLES DRIVE

City

NAPLES

State

FL

Zip Code

34102-7928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	2	4

Transaction ID : SA11A.559703

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

HENLEY, DOY, , ,

Mailing Address 14251 MIMOSA LN.

City

TUSTIN

State

CA

Zip Code

92780-2334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11A.559700

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

1520.24

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

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

HICKS, THOMAS, O., MR., SR.

A.

Mailing Address 2200 ROSS AVENUE SUITE 4600W

City  
DALLASState  
TXZip Code  
75201-7931FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HICKS HOLDINGSOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2024

Transaction ID : SA11A.559701

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City  
DELRAY BEACHState  
FLZip Code  
33484-8824FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 02 2025

Transaction ID : SA11A.559771

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City  
DELRAY BEACHState  
FLZip Code  
33484-8824FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2024

Transaction ID : SA11A.559782

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

1050.00



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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

OGDEN, JAMES, , MR.,

**A.**

Mailing Address 118 E OCEAN AVE

City

EDGEWATER

State

FL

Zip Code

32132-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	2	4

Transaction ID : SA11A.559695

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PECK, JOHN, M., MR., JR.

**B.**

Mailing Address 5940 WATSON AVENUE

City

DALLAS

State

TX

Zip Code

75225-1651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	2	4

Transaction ID : SA11A.559702

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**C.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	2	4

Transaction ID : SA11A.559832

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

1150.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

RANKIN, DOUGLAS, , MR.,

**A.**Mailing Address 2335 TAMIAMI TRAIL  
SUITE 308City  
NAPLESState  
FLZip Code  
34103-4458FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		27		2024

Transaction ID : SA11A.559688

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SCHULCZ , ARTHUR, A., MR., SR.

**B.**

Mailing Address 21043 HONEYCREEPER PL.

City  
LEESBURGState  
VAZip Code  
20175-6598FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		01		2025

Transaction ID : SA11A.559635

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SCHULTZ, DONNA, , MS.,

**C.**

Mailing Address 4801 ZINFANDEL LN

City  
BAKERSFIELDState  
CAZip Code  
93306-1859FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2024

Transaction ID : SA11A.559783

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

80.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SMITH, MERRILL, , ,

**A.**

Mailing Address 1700 SOUTHEAST 9TH STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33316-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INCOMMOccupation  
EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2024			

Transaction ID : SA11A.559691

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

SPEECE, EMILY, , ,

Mailing Address 307 SMITHSON STREET

City

DEXTER CITY

State

OH

Zip Code

45727-9749

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2024			

Transaction ID : SA11A.559827

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

WRIGHT, RICHARD, , ,

Mailing Address 83 SEA FERN DRIVE

City

LEESBURG

State

FL

Zip Code

34788-8638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			29			2024			

Transaction ID : SA11A.559831

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

200.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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)

**RICK SCOTT FOR FLORIDA**Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address P.O. BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		13		2025

Transaction ID : SA11C.560143

Amount of Each Receipt this Period

3073.08

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLDFull Name (Last, First, Middle Initial)  
CANTRELL, JOHN, , MR.,

Mailing Address 433 HARRISON AVE

City  
PANAMA CITYState  
FLZip Code  
32401-2731FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		06		2025

Transaction ID : SA11A.560349

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
COBB, RAFAEL, , ,

Mailing Address 1818 SW 17 ST. APART 1506

City  
FORT LAUDERDALEState  
FLZip Code  
33316-FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		07		2025

Transaction ID : SA11A.560348

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

200.00

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KOMADA, ANNA, , MS.,

**A.**

Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.560288

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

NAYLON, JENNIFER, , ,

**B.**

Mailing Address 5808 HIGHCLIFFE COURT

City

THOUSAND OAKS

State

CA

Zip Code

91362-5247

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 05 2025

Transaction ID : SA11A.560344

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PAYNE, JOHN, , MR.,

**C.**

Mailing Address 9900 NORTHEAST 114TH CIRCLE

City

VANCOUVER

State

WA

Zip Code

98662-1588

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PET HEALTH INNOVATIONS, LLC

Occupation

CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 04 2025

Transaction ID : SA11A.560351

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

195.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**A.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 07 2025

Transaction ID : SA11A.560341

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

RAFFENSBERGER, VERN, E., ,

**B.**

Mailing Address 214 GLEN ROCK RD

City

GLEN ROCK

State

PA

Zip Code

17327-8300

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 09 2025

Transaction ID : SA11A.560345

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

RATLIFF, DONALD, , ,

**C.**

Mailing Address 1812 RATLIFF RD

City

BIG STONE GAP

State

VA

Zip Code

24219-4572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 06 2025

Transaction ID : SA11A.560350

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

245.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHULCZ, ARTHUR, A., MR., SR.

A.

Mailing Address 21043 HONEYCREEPER PL.

City

LEESBURG

State

VA

Zip Code

20175-6598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 04 2025

Transaction ID : SA11A.560342

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

B.

Mailing Address 12505 TABOR OAKS DR

City

AUSTIN

State

TX

Zip Code

78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 05 2025

Transaction ID : SA11A.560150

Amount of Each Receipt this Period

0.10

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

TRABUE, NELSON, , ,

C.

Mailing Address 920 TRABUE DRIVE

City

ASHLAND CITY

State

TN

Zip Code

37015-4929

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 09 2025

Transaction ID : SA11A.560337

Amount of Each Receipt this Period

42.75

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

92.85

**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  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 20 2025

Transaction ID : SA11C.560413

Amount of Each Receipt this Period

4053.21

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)  
BAIRD, NELSON, CLIFFORD, ,

**B.** Mailing Address 1750 NEWTON RD

City  
FERRIS

State  
TX

Zip Code  
75125-9464

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

IBM

SR CONSULTANT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 10 2025

Transaction ID : SA11A.560649

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
BUCINA, RON, , MR.,

**C.** Mailing Address 900 POPLAR HILL RD

City  
PROSPECT

State  
TN

Zip Code  
38477-6011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 12 2025

Transaction ID : SA11A.560646

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

145.00

**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  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**A.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 15 2025

Transaction ID : SA11A.560529

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 11 2025

Transaction ID : SA11A.560531

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 11 2025

Transaction ID : SA11A.560624

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

36.98

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**A.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

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

Transaction ID : SA11A.560642

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

CATION, LANNIE, , DR.,

Mailing Address 720 TRILLIUM STREET

City

LEBANON

State

IN

Zip Code

46052-1693

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ASCENSION ST VINCENT

Occupation

PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

Transaction ID : SA11A.560643

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

FEIGENBAUM, ROBERT, , ,

Mailing Address 339 AVALON DRIVE

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COVENANT AVIATION SECURITY

Occupation

TRANSPORTATION SECURITY OFFICER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

Transaction ID : SA11A.560661

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

350.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

FULDNER, CHRIS, T., MR.,

**A.** Mailing Address 5035 STONEGATE CTCity  
SPRINGFIELDState  
MOZip Code  
65809-4013FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		15		2025

Transaction ID : SA11A.560639

Amount of Each Receipt this Period

49.50

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

KELLER, JEROME, , ,

**B.** Mailing Address 526 THOMAS JEFFERSONCity  
WAYNEState  
PAZip Code  
19087-FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		10		2025

Transaction ID : SA11A.560660

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MALONE, CARMEN, , ,

**C.** Mailing Address 132 ANNANDALE PKWY. EASTCity  
MADISONState  
MSZip Code  
39110-7955FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.75

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2025

Transaction ID : SA11A.560638

Amount of Each Receipt this Period

42.75

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

192.25
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MCCABE, DANIEL, , MR.,

**A.**

Mailing Address 239 WEST TRAIL

City  
STAMFORDState  
CTZip Code  
06903-2407FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 11 2025

Transaction ID : SA11A.560648

Amount of Each Receipt this Period

95.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

NEWBY, THERESA, , ,

Mailing Address 6127 TREVINO AVENUE

City  
LAS VEGASState  
NVZip Code  
89131-5926FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 11 2025

Transaction ID : SA11A.560656

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

NEWELL, GUY, , MR.,

Mailing Address 1830 MANGO ST NE

City  
PALM BAYState  
FLZip Code  
32905-3335FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DRSOccupation  
ENGINEER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 11 2025

Transaction ID : SA11A.560647

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

245.00

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

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PIOTROWSKI, DENNIS, , MR.,

**A.** Mailing Address 496 WINDING WILLOW DRIVE

City

PALM HARBOR

State

FL

Zip Code

34683-5835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11A.560652

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
POWELL, SCOTT, , MR.,

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

Transaction ID : SA11A.560644

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
RICHARDSON, NANCY, , ,

Mailing Address 75 IDLEWILD STREET

City

LUMBERTON

State

TX

Zip Code

77657-6934

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

297.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

Transaction ID : SA11A.560650

Amount of Each Receipt this Period

99.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

249.00

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

Use separate schedule(s)  
for each category of the  
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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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ROBINSON, MARGARET, , ,

**A.**

Mailing Address 21650 PASEO MARAVIA

City

MISSION VIEJO

State

CA

Zip Code

92692-4963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 11 2025

Transaction ID : SA11A.560640

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

RODRIGUEZ, RAFAEL, , PROF.,

**B.**

Mailing Address P.O. BOX 363185

City

SAN JUAN

State

PR

Zip Code

00936-3185

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNIVERSITY OF PUERTO RICO

Occupation

PROFESSOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 14 2025

Transaction ID : SA11A.560653

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SCHULTZ, DONNA, , MS.,

**C.**

Mailing Address 4801 ZINFANDEL LN

City

BAKERSFIELD

State

CA

Zip Code

93306-1859

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 12 2025

Transaction ID : SA11A.560621

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

174.50

**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  
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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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

**A.**

Mailing Address 12505 TABOR OAKS DR

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 10 2025

Transaction ID : SA11A.560603

Amount of Each Receipt this Period

23.75

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ZIMMERMAN, JEAN, , MS.,

**B.**

Mailing Address 60 SEAGATE DR APT 1101

City  
NAPLES

State  
FL

Zip Code  
34103-2443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 15 2025

Transaction ID : SA11A.560651

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 27 2025

Transaction ID : SA11C.561036

Amount of Each Receipt this Period

5555.37

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

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

123.75

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

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

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(check only one)

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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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ALSTON, DAVID, , ,

**A.**

Mailing Address 17630 N GOLDWATER DR.

City  
SURPRISE

State  
AZ

Zip Code  
85374-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISITING ANGELD

Occupation  
CAREGIVER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA11A.561377

Amount of Each Receipt this Period

99.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BRYANT, MARY, D., MS.,

**B.**

Mailing Address 1700 PARK SHORE RD

City  
LA GRANGE

State  
KY

Zip Code  
40031-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.561346

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BUCKNO, ANDREA, , ,

**C.**

Mailing Address 916 N. 21ST STREET

City  
ALLENTOWN

State  
PA

Zip Code  
18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOT APPLICABLE

Occupation  
DISABILITY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.561348

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

149.00



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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**A.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	5	

Transaction ID : SA11A.561197

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	5	

Transaction ID : SA11A.561290

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

CONNORS, PETER, , ,

Mailing Address 190 RIDGEWOOD RD

City

RADNOR

State

PA

Zip Code

19087-2845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REMCON

Occupation

MANAGER

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	5	

Transaction ID : SA11A.561380

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

126.23

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

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

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

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

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**A.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RANCHER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 18 2025

Transaction ID : SA11A.561364

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**B.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RANCHER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 16 2025

Transaction ID : SA11A.561378

Amount of Each Receipt this Period

99.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

HALE, LARRY, , MR.,

**C.**

Mailing Address 7835 MUDVILLE

City

MILLINGTON

State

TN

Zip Code

38053-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 22 2025

Transaction ID : SA11A.561363

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

198.00

**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  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

**A.**

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City

DELRAY BEACH

State

FL

Zip Code

33484-8824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.561275

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

KIRKPATRICK, JEANNE, , ,

**B.**

Mailing Address 661 HARRISON AVE

City

GLENSIDE

State

PA

Zip Code

19038-2505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GROCERY STORE

Occupation

WORKER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 22 2025

Transaction ID : SA11A.561368

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

KOMADA, ANNA, , MS.,

**C.**

Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 16 2025

Transaction ID : SA11A.561148

Amount of Each Receipt this Period

3.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

73.00

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KOMADA, ANNA, , MS.,

**A.**

Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 16 2025

Transaction ID : SA11A.561352

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

**B.**

Mailing Address P.O. BOX 246

City

RICHLAND

State

GA

Zip Code

31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA11A.561198

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

**C.**

Mailing Address P.O. BOX 246

City

RICHLAND

State

GA

Zip Code

31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA11A.561265

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

50.99

**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  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NIELSEN, LINDA, , ,

**A.** Mailing Address 28405 ALMONA WAY

City

VALLEY CENTER

State

CA

Zip Code

92082-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.561384

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

NIELSEN, LINDA, , ,

**B.** Mailing Address 28405 ALMONA WAY

City

VALLEY CENTER

State

CA

Zip Code

92082-6211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.561394

Amount of Each Receipt this Period

- 250.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

Full Name (Last, First, Middle Initial)

O'STEEN, TOM, , ,

**C.** Mailing Address 5107 PIRATES COVE ROAD

City

JACKSONVILLE

State

FL

Zip Code

32210-8311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

AUTO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA11A.561365

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

50.00

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

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PATTERSON, JESSICA, , ,

**A.**

Mailing Address 1351 EMERALD CIRCLE

City

SOUTHLAKE

State

TX

Zip Code

76092-3305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AA

Occupation

FLIGHT ATTENDANT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	5

Transaction ID : SA11A.561382

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**B.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

Transaction ID : SA11A.561359

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

QUINN, CHRISTINE, , ,

**C.**

Mailing Address 15301 ROOSEVELT BLVD, STE 303

City

CLEARWATER

State

FL

Zip Code

33760-3561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHRISTINE QUINN

Occupation

BUSINESS OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11A.561385

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

630.00

**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  
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(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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ROE, JOAN, ELLEN, MS.,

**A.** Mailing Address 360 W NOKOMIS CT

City

MILWAUKEE

State

WI

Zip Code

53217-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA11A.561367

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ROE, JOAN, ELLEN, MS.,

**B.** Mailing Address 360 W NOKOMIS CT

City

MILWAUKEE

State

WI

Zip Code

53217-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 20 2025

Transaction ID : SA11A.561372

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

**C.** Mailing Address 12505 TABOR OAKS DR

City

AUSTIN

State

TX

Zip Code

78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 22 2025

Transaction ID : SA11A.561317

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SOSNICK, NIKKE, , ,

**A.**

Mailing Address 510 PAJARO COURT

City

SACRAMENTO

State

CA

Zip Code

95864-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 20 2025

Transaction ID : SA11A.561373

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SPEECE, EMILY, , ,

**B.**

Mailing Address 307 SMITHSON STREET

City

DEXTER CITY

State

OH

Zip Code

45727-9749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 17 2025

Transaction ID : SA11A.561376

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

STORY, VICTOR, B., MR., JR.

**C.**

Mailing Address P.O. BOX 857

City

BABSON PARK

State

FL

Zip Code

33827-0857

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 22 2025

Transaction ID : SA11A.561370

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

150.00



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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

VEIGLE, JIM, , MR.,

**A.**

Mailing Address 1301 WEST FAIRBANKS AVENUE

City

WINTER PARK

State

FL

Zip Code

32789-4803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11A.561381

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

WILKERSON, WILLIAM, A., MR.,

Mailing Address 2810 E OAKLAND PARK BLVD STE 308

City

FORT LAUDERDALE

State

FL

Zip Code

33306-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BCT INI INC

Occupation

CEO

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

Transaction ID : SA11A.561379

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

WRIGHT, RICHARD, , ,

Mailing Address 83 SEA FERN DRIVE

City

LEESBURG

State

FL

Zip Code

34788-8638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

328.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	5

Transaction ID : SA11A.561362

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

244.65

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 03 2025

Transaction ID : SA11C.561497

Amount of Each Receipt this Period

22959.59

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)  
BANGERT, MARILYN, , MS.,

**B.** Mailing Address 8713 US HWY 85

City  
FORT LUPTON

State  
CO

Zip Code  
80621-9309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.562250

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
BANGERT, MARILYN, , MS.,

**C.** Mailing Address 8713 US HWY 85

City  
FORT LUPTON

State  
CO

Zip Code  
80621-9309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.563159

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

30.00

**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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BANGERT, MARILYN, , MS.,

**A.**

Mailing Address 8713 US HWY 85

City

FORT LUPTON

State

CO

Zip Code

80621-9309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.563196

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BANGERT, MARILYN, , MS.,

**B.**

Mailing Address 8713 US HWY 85

City

FORT LUPTON

State

CO

Zip Code

80621-9309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 24 2025

Transaction ID : SA11A.563234

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

**C.**

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 28 2025

Transaction ID : SA11A.563240

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

400.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

**A.**

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : SA11A.568780

Amount of Each Receipt this Period

- 250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**B.**

Full Name (Last, First, Middle Initial)

BROWN, SHARMAN, , ,

Mailing Address 110 CLIFF STREET

City

CORDOVA

State

AL

Zip Code

35550-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

Transaction ID : SA11A.562479

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

BROWN, SHARMAN, , ,

Mailing Address 110 CLIFF STREET

City

CORDOVA

State

AL

Zip Code

35550-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

Transaction ID : SA11A.563242

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

5.99

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**BRYANT, MARY, D., MS.,****A.**

Mailing Address 1700 PARK SHORE RD

City  
LA GRANGEState  
KYZip Code  
40031-8024FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		30		2025

Transaction ID : SA11A.563155

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

**CAMPBELL, CHARLES, , ,****B.**

Mailing Address 5540 SARATOGA BLVD

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STRCOccupation  
MD

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		28		2025

Transaction ID : SA11A.562453

Amount of Each Receipt this Period

5.99

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

**CAMPBELL, CHARLES, , ,****C.**

Mailing Address 5540 SARATOGA BLVD

City  
CORPUS CHRISTIState  
TXZip Code  
78413-2953FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STRCOccupation  
MD

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		28		2025

Transaction ID : SA11A.563238

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

280.99
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# **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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CARUSO, JASON, , MR.,

**A.**

Mailing Address 855 SUMMIT RD

City

NEW RICHMOND

State

WI

Zip Code

54017-1443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BURGER BROS

Occupation

OWNER

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y  
01 26 2025

Transaction ID : SA11A.563189

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**B.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.562466

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**C.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.562917

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

75.73

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 316

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**A.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

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

Transaction ID : SA11A.563050

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City

NOVI

State

MI

Zip Code

48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	5	

Transaction ID : SA11A.562161

Amount of Each Receipt this Period

3.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City

NOVI

State

MI

Zip Code

48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	5	

Transaction ID : SA11A.562480

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

29.23

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

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

**A.**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.562797

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.562811

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.562964

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

60.72



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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

**A.**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.562967

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City  
NOVIState  
MIZip Code  
48374-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.563198

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

HICKS, THOMAS, O., MR., SR.

Mailing Address 2200 ROSS AVENUE SUITE 4600W

City  
DALLASState  
TXZip Code  
75201-7931FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HICKS HOLDINGSOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 26 2025

Transaction ID : SA11A.563250

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

1070.24

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

HILL, VERNON, W., II

**A.**Mailing Address 50 SOUTH 16TH STREET  
SUITE 2400City  
PHILADELPHIAState  
PAZip Code  
19102-2526FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL COOccupation  
INVESTOR

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2025

Transaction ID : SA11A.563192

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

HOWARD, DONNA, , ,

Mailing Address 501 CR 192

City  
CARBONState  
TXZip Code  
76435-2408FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOWARD CASING TUBINGOccupation  
SELF-EMPLOYED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2025

Transaction ID : SA11A.563237

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

JACOBS, DONNIE, , ,

Mailing Address 4161HWY230

City  
WALNUT RIDGEState  
ARZip Code  
72476-8759FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
FARMING

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		28		2025

Transaction ID : SA11A.563239

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

550.00
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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

**A.**

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.562467

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA11A.563241

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

LEVANG, PATSY, , ,

Mailing Address 10841 HWY 73

City

WATFORD CITY

State

ND

Zip Code

58854-9556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

501.75

Date of Receipt

M M / D D / Y Y Y Y Y  
01 24 2025

Transaction ID : SA11A.563246

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

505.99

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

LIM, MATTHEW, , ,

**A.**

Mailing Address 1050 OAK GROVE AVE

City

SAN MARINO

State

CA

Zip Code

91108-1026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 24 2025

Transaction ID : SA11A.563245

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MANNO, JOHN, , ,

**B.**

Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 25 2025

Transaction ID : SA11A.563244

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

OGDEN, JAMES, , MR.,

**C.**

Mailing Address 118 E OCEAN AVE

City

EDGEWATER

State

FL

Zip Code

32132-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 28 2025

Transaction ID : SA11A.563229

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

600.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

OHANLON, MICHAEL, , ,

**A.**

Mailing Address 106 HAWK CT.

City

MECHANICSBURG

State

PA

Zip Code

17050-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 26 2025

Transaction ID : SA11A.563243

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

OHANLON, MICHAEL, , ,

**B.**

Mailing Address 106 HAWK CT.

City

MECHANICSBURG

State

PA

Zip Code

17050-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 24 2025

Transaction ID : SA11A.563248

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**C.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 25 2025

Transaction ID : SA11A.562505

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

756.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**A.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y  
01 25 2025

Transaction ID : SA11A.562990

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 28 2025

Transaction ID : SA11A.563201

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 25 2025

Transaction ID : SA11A.563231

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.24

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

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

RANKIN, DOUGLAS, , MR.,

**A.**Mailing Address 2335 TAMIAMI TRAIL  
SUITE 308City  
NAPLESState  
FLZip Code  
34103-4458FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		27		2025

Transaction ID : SA11A.563205

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SANTOSPAGO, LOUIS, , ,

**B.**

Mailing Address 32 HARLESTON GREEN ROAD

City  
HILTON HEAD ISLANDState  
SCZip Code  
29928-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		24		2025

Transaction ID : SA11A.563247

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, DENNIS, , ,

**C.**

Mailing Address 34073 E 740RD

City  
WAGONERState  
OKZip Code  
74467-9433FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

281.23

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		24		2025

Transaction ID : SA11A.562494

Amount of Each Receipt this Period

5.99

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

305.99

**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 PageFOR LINE NUMBER:  
(check only one)

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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SMITH, DENNIS, , ,

**A.**

Mailing Address 34073 E 740RD

City

WAGONER

State

OK

Zip Code

74467-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

281.23

Date of Receipt

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

Transaction ID : SA11A.563114

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

SMITH, DENNIS, , ,

Mailing Address 34073 E 740RD

City

WAGONER

State

OK

Zip Code

74467-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

281.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	5	

Transaction ID : SA11A.563236

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

SOSNICK, NIKKE, , ,

Mailing Address 510 PAJARO COURT

City

SACRAMENTO

State

CA

Zip Code

95864-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11A.563165

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

295.24

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



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

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

FOR LINE NUMBER:  
(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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

VALERIODURAN, SANDRA, , ,

**A.**

Mailing Address 685 SOUTH BAYFIELD AVENUE

City

PUEBLO WEST

State

CO

Zip Code

81007-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 28 2025

Transaction ID : SA11A.563249

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

VALERIODURAN, SANDRA, , ,

Mailing Address 685 SOUTH BAYFIELD AVENUE

City

PUEBLO WEST

State

CO

Zip Code

81007-2799

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 03 2025

Transaction ID : SA11A.563251

Amount of Each Receipt this Period

- 1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

**C.**

Full Name (Last, First, Middle Initial)

WRIGHT, RICHARD, , ,

Mailing Address 83 SEA FERN DRIVE

City

LEESBURG

State

FL

Zip Code

34788-8638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 29 2025

Transaction ID : SA11A.563197

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

50.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

YORK, DOUGLAS, , ,

**A.**

Mailing Address 6300 E KEIM DR

City

PARADISE VALLEY

State

AZ

Zip Code

85253-4275

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EWING

Occupation

PRESIDENT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	5	

Transaction ID : SA11A.563223

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

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

Transaction ID : SA11C.563379

Amount of Each Receipt this Period

12450.94

☒ Memo Item  
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**C.**

Full Name (Last, First, Middle Initial)

BOYD, STEVE, , ,

Mailing Address 4545 S LAFAYETTE ST

City

CHERRY HILLS VILLA

State

CO

Zip Code

80113-5945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.564097

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

300.00

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

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

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CANTRELL, JOHN, , MR.,

**A.**

Mailing Address 433 HARRISON AVE

City

PANAMA CITY

State

FL

Zip Code

32401-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 06 2025

Transaction ID : SA11A.564087

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CANTRELL, JOHN, , MR.,

**B.**

Mailing Address 433 HARRISON AVE

City

PANAMA CITY

State

FL

Zip Code

32401-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564093

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**C.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.563750

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

205.99

**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

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(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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CASSENTI, JEAN, , ,

**A.**

Mailing Address 29 ARNOLD DR

City

TOLLAND

State

CT

Zip Code

06084-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.563997

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

DOD, ROBERT, , ,

**B.**

Mailing Address 114 CHURCH STREET

City

BRISTOL

State

RI

Zip Code

02809-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 02 2025

Transaction ID : SA11A.564099

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

DOD, ROBERT, , ,

**C.**

Mailing Address 114 CHURCH STREET

City

BRISTOL

State

RI

Zip Code

02809-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : SA11A.568068

Amount of Each Receipt this Period

- 250.00

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

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

20.24

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**A.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RANCHER

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2025

01

2025

Transaction ID : SA11A.563946

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

HENLEY, DOY, , ,

Mailing Address 14251 MIMOSA LN.

City

TUSTIN

State

CA

Zip Code

92780-2334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 01 / 2025

01

2025

Transaction ID : SA11A.564103

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

HILL, VERNON, W., , II

Mailing Address 50 SOUTH 16TH STREET  
SUITE 2400

City

PHILADELPHIA

State

PA

Zip Code

19102-2526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HILL CO

Occupation

INVESTOR

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2025

31

2025

Transaction ID : SA11A.564084

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

570.24

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

HILL, VERNON, W., II

**A.**Mailing Address 50 SOUTH 16TH STREET  
SUITE 2400City  
PHILADELPHIAState  
PAZip Code  
19102-2526FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL COOccupation  
INVESTOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 02 2025

Transaction ID : SA11A.564092

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City  
DELRAY BEACHState  
FLZip Code  
33484-8824FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 02 2025

Transaction ID : SA11A.564033

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City  
DELRAY BEACHState  
FLZip Code  
33484-8824FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564039

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

150.00

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

Use separate schedule(s)  
for each category of the  
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(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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

LAVIS, JOAN, , ,

**A.**

Mailing Address 182 ROWAYTON WOODS DRIVE

City  
NORWALK

State  
CT

Zip Code  
06854-3911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M M / D D / Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.563749

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LAVIS, JOAN, , ,

**B.**

Mailing Address 182 ROWAYTON WOODS DRIVE

City  
NORWALK

State  
CT

Zip Code  
06854-3911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M M / D D / Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564101

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LEVANG, PATSY, , ,

**C.**

Mailing Address 10841 HWY 73

City  
WATFORD CITY

State  
ND

Zip Code  
58854-9556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

501.75

Date of Receipt

M M / D D / Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564100

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

505.99

# **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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MANNO, JOHN, , ,

**A.**

Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 01 2025

Transaction ID : SA11A.563965

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MEREDITH, RANDY, , ,

**B.**

Mailing Address 266 BULLFINCH RD

City

MOORESVILLE

State

NC

Zip Code

28117-5407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 01 2025

Transaction ID : SA11A.563746

Amount of Each Receipt this Period

5.99

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MEREDITH, RANDY, , ,

**C.**

Mailing Address 266 BULLFINCH RD

City

MOORESVILLE

State

NC

Zip Code

28117-5407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 01 2025

Transaction ID : SA11A.563955

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

46.47



# **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

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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MUNN, NANCY, , ,

**A.**

Mailing Address 6605 W BRAEBOURNE DR

City  
ROGERS

State  
AR

Zip Code  
72758-8963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 02 2025

Transaction ID : SA11A.564105

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MURRAY, WILLIAM, , ,

**B.**

Mailing Address 631 WEST 2D NORTH

City  
SAINT ANTHONY

State  
ID

Zip Code  
83445-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 01 2025

Transaction ID : SA11A.564104

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MURRAY, WILLIAM, , ,

**C.**

Mailing Address 631 WEST 2D NORTH

City  
SAINT ANTHONY

State  
ID

Zip Code  
83445-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564106

Amount of Each Receipt this Period

- 500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

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

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NAYLON, JENNIFER, , ,

**A.** Mailing Address 5808 HIGHCLIFFE COURTCity  
THOUSAND OAKSState  
CAZip Code  
91362-5247FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 05 2025

Transaction ID : SA11A.564086

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
NEMEROFF, EILEEN, , ,  
Mailing Address 20 POND CROSSINGCity  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M M / D D / Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.563597

Amount of Each Receipt this Period

2.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
NEMEROFF, EILEEN, , ,  
Mailing Address 20 POND CROSSINGCity  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M M / D D / Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.563967

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

97.24

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

**A.**

Mailing Address 20 POND CROSSING

City  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

Transaction ID : SA11A.564006

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

NGUYEN, NGAI, , ,

Mailing Address 38 N ALMADEN BLVD 501

City  
SAN JOSEState  
CAZip Code  
95110-2741FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.564098

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

PAYNE, JOHN, , MR.,

Mailing Address 9900 NORTHEAST 114TH CIRCLE

City  
VANCOUVERState  
WAZip Code  
98662-1588FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PET HEALTH INNOVATIONS, LLCOccupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11A.564089

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

370.24

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

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**Full Name (Last, First, Middle Initial)  
PIOTROWSKI, DENNIS, , MR.,**A.** Mailing Address 496 WINDING WILLOW DRIVECity  
PALM HARBORState  
FLZip Code  
34683-5835FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564095

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
RATLIFF, DONALD, , ,**B.** Mailing Address 1812 RATLIFF RDCity  
BIG STONE GAPState  
VAZip Code  
24219-4572FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 06 2025

Transaction ID : SA11A.564088

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
SCHULCZ, ARTHUR, A., MR., SR.**C.** Mailing Address 21043 HONEYCREEPER PL.City  
LEESBURGState  
VAZip Code  
20175-6598FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 01 2025

Transaction ID : SA11A.563694

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHULCZ, ARTHUR, A., MR., SR.

A.

Mailing Address 21043 HONEYCREEPER PL.

City

LEESBURG

State

VA

Zip Code

20175-6598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 04 2025

Transaction ID : SA11A.564068

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SCHULTZ, DONNA, , MS.,

B.

Mailing Address 4801 ZINFANDEL LN

City

BAKERSFIELD

State

CA

Zip Code

93306-1859

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564040

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, MERRILL, , ,

C.

Mailing Address 1700 SOUTHEAST 9TH STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33316-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INCOMM

Occupation  
EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564094

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

175.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SOSNICK, NIKKE, , ,

**A.**

Mailing Address 510 PAJARO COURT

City

SACRAMENTO

State

CA

Zip Code

95864-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA11A.564043

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

WADE, EDWARD, , ,

Mailing Address 617 N POWELL CIR

City

WICHITA

State

KS

Zip Code

67230-1524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 02 2025

Transaction ID : SA11A.564102

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11C.564309

Amount of Each Receipt this Period

2097.79

☒ Memo Item  
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 87 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BAIRD, NELSON, CLIFFORD, ,

**A.**

Mailing Address 1750 NEWTON RD

City

FERRIS

State

TX

Zip Code

75125-9464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IBM

Occupation

SR CONSULTANT

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA11A.564439

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BUCINA, RON, , MR.,

**B.**

Mailing Address 900 POPLAR HILL RD

City

PROSPECT

State

TN

Zip Code

38477-6011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025

Transaction ID : SA11A.564434

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

COBB, RAFAEL, , ,

**C.**

Mailing Address 1818 SW 17 ST. APART 1506

City

FORT LAUDERDALE

State

FL

Zip Code

33316-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 07 / 2025

Transaction ID : SA11A.564443

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

245.00

**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 88 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KELLER, JEROME, , ,

**A.**

Mailing Address 526 THOMAS JEFFERSON

City

WAYNE

State

PA

Zip Code

19087-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 10 2025

Transaction ID : SA11A.564442

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MALONE, CARMEN, , ,

**B.**

Mailing Address 132 ANNANDALE PKWY. EAST

City

MADISON

State

MS

Zip Code

39110-7955

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 12 2025

Transaction ID : SA11A.564430

Amount of Each Receipt this Period

42.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MCCABE, DANIEL, , MR.,

**C.**

Mailing Address 239 WEST TRAIL

City

STAMFORD

State

CT

Zip Code

06903-2407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 11 2025

Transaction ID : SA11A.564438

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

237.75



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

PAGE 89 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

**A.**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

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

Transaction ID : SA11A.564375

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

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

Transaction ID : SA11A.564429

Amount of Each Receipt this Period

36.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

NEWBY, THERESA, , ,

Mailing Address 6127 TREVINO AVENUE

City

LAS VEGAS

State

NV

Zip Code

89131-5926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11A.564441

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

141.99

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 316

(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NEWELL, GUY, , MR.,

A.

Mailing Address 1830 MANGO ST NE

City

PALM BAY

State

FL

Zip Code

32905-3335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRS

Occupation

ENGINEER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.564435

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	2	5

Transaction ID : SA11A.564437

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

RAFFENSBERGER, VERN, E., ,

Mailing Address 214 GLEN ROCK RD

City

GLEN ROCK

State

PA

Zip Code

17327-8300

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	5

Transaction ID : SA11A.564440

Amount of Each Receipt this Period

95.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

195.00

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ROBINSON, MARGARET, , ,

**A.**

Mailing Address 21650 PASEO MARAVIA

City

MISSION VIEJO

State

CA

Zip Code

92692-4963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

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

Transaction ID : SA11A.564433

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

SCHULTZ, DONNA, , MS.,

Mailing Address 4801 ZINFANDEL LN

City

BAKERSFIELD

State

CA

Zip Code

93306-1859

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11A.564413

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

Mailing Address 12505 TABOR OAKS DR

City

AUSTIN

State

TX

Zip Code

78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

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

Transaction ID : SA11A.564404

Amount of Each Receipt this Period

23.75

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

98.25

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

TRABUE, NELSON, , ,

**A.**

Mailing Address 920 TRABUE DRIVE

City

ASHLAND CITY

State

TN

Zip Code

37015-4929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.75

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		09		2025

Transaction ID : SA11A.564431

Amount of Each Receipt this Period

42.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2025

Transaction ID : SA11C.564609

Amount of Each Receipt this Period

9971.81

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**C.**

Full Name (Last, First, Middle Initial)

BRYANT, MARY, D., MS.,

Mailing Address 1700 PARK SHORE RD

City

LA GRANGE

State

KY

Zip Code

40031-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		17		2025

Transaction ID : SA11A.565140

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

67.75

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CATION, LANNIE, , DR.,

**A.** Mailing Address 720 TRILLIUM STREET

City

LEBANON

State

IN

Zip Code

46052-1693

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ASCENSION ST VINCENT

Occupation

PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	2	5

Transaction ID : SA11A.565195

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
DANGELAS, MAYA, , ,  
Mailing Address 11434 GALLANT RIDGE LANE

City

HOUSTON

State

TX

Zip Code

77082-6817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US GLOBAL INSTITUTE

Occupation

EDUCATOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11A.565212

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
DILORENZO, ESTHER, , ,  
Mailing Address 46309 CORDOBA DRIVE

City

NOVI

State

MI

Zip Code

48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

Transaction ID : SA11A.564826

Amount of Each Receipt this Period

4.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

304.00

**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  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

**A.**

Mailing Address 46309 CORDOBA DRIVE

City  
NOVI

State  
MI

Zip Code  
48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.564928

Amount of Each Receipt this Period

6.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City  
NOVI

State  
MI

Zip Code  
48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565086

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City  
NOVI

State  
MI

Zip Code  
48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565091

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

46.48

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**A.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RANCHER

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 18 2025

Transaction ID : SA11A.565188

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**B.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RANCHER

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 16 2025

Transaction ID : SA11A.565199

Amount of Each Receipt this Period

99.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

FEIGENBAUM, ROBERT, , ,

**C.**

Mailing Address 339 AVALON DRIVE

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COVENANT AVIATION SECURITY

Occupation

TRANSPORTATION SECURITY OFFICER

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 13 2025

Transaction ID : SA11A.565214

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

398.50

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

FULDNER, CHRIS, T., MR.,

**A.** Mailing Address 5035 STONEGATE CT

City  
SPRINGFIELD

State  
MO

Zip Code  
65809-4013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 15 2025

Transaction ID : SA11A.565189

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

**B.** Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City  
DELRAY BEACH

State  
FL

Zip Code  
33484-8824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565038

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

KLEIN, MICHAEL, , ,

**C.** Mailing Address 5220 KLEE MILL ROAD

City  
SYKESVILLE

State  
MD

Zip Code  
21784-9257

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAK KLEIN INC

Occupation  
MECHANICAL

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.564920

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

75.49



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KLEIN, MICHAEL, , ,

**A.**

Mailing Address 5220 KLEE MILL ROAD

City

SYKESVILLE

State

MD

Zip Code

21784-9257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAK KLEIN INC

Occupation

MECHANICAL

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565215

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LAPELLE, RYAN, , ,

**B.**

Mailing Address 34 NATALIE LN

City

LAKE ZURICH

State

IL

Zip Code

60047-1770

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PIER 25 CAPITAL

Occupation

CONSULTANT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.564909

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LAPELLE, RYAN, , ,

**C.**

Mailing Address 34 NATALIE LN

City

LAKE ZURICH

State

IL

Zip Code

60047-1770

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PIER 25 CAPITAL

Occupation

CONSULTANT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.565211

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

755.99

**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

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(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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

**A.**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 18 2025

Transaction ID : SA11A.564915

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

**B.**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.564916

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

**C.**

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 18 2025

Transaction ID : SA11A.565202

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

111.98

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

**A.** Mailing Address 20 POND CROSSINGCity  
SOUTHAMPTONState  
NYZip Code  
11968-4728FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565209

Amount of Each Receipt this Period

180.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
PALMER, GENEVA SUE, , ,  
Mailing Address 7952 HUNTERS BEND COVECity  
OLIVE BRANCHState  
MSZip Code  
38654-5959FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y  
02 20 2025

Transaction ID : SA11A.564907

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
PALMER, GENEVA SUE, , ,  
Mailing Address 7952 HUNTERS BEND COVECity  
OLIVE BRANCHState  
MSZip Code  
38654-5959FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y  
02 20 2025

Transaction ID : SA11A.564908

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

191.98

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

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

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(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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**A.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.564927

Amount of Each Receipt this Period

6.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**B.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.565022

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**C.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 20 2025

Transaction ID : SA11A.565117

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

48.75

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**A.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

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

Transaction ID : SA11A.565210

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

PATTERSON, JESSICA, , ,

Mailing Address 1351 EMERALD CIRCLE

City

SOUTHLAKE

State

TX

Zip Code

76092-3305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AA

Occupation

FLIGHT ATTENDANT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

Transaction ID : SA11A.565204

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

PEREZ, OMAR, , ,

Mailing Address 10640 SPYGLASS HILL RD

City

WHITTIER

State

CA

Zip Code

90601-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

O PEREZ MD

Occupation

PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

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

Transaction ID : SA11A.564922

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

355.99

**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  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PEREZ, OMAR, , ,

**A.**

Mailing Address 10640 SPYGLASS HILL RD

City

WHITTIER

State

CA

Zip Code

90601-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

O PEREZ MD

Occupation

PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 16 2025

Transaction ID : SA11A.565213

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PIOTROWSKI, DENNIS, , MR.,

**B.**

Mailing Address 496 WINDING WILLOW DRIVE

City

PALM HARBOR

State

FL

Zip Code

34683-5835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 15 2025

Transaction ID : SA11A.565206

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**C.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 13 2025

Transaction ID : SA11A.565196

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

400.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)  
RODRIGUEZ, RAFAEL, , PROF.,

**A.** Mailing Address P.O. BOX 363185

City  
SAN JUAN

State  
PR

Zip Code  
00936-3185

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF PUERTO RICO

Occupation  
PROFESSOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 14 2025

Transaction ID : SA11A.565207

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
SANDERSON, JAMIE, , ,

**B.** Mailing Address 422 MINI FARM ROAD

City  
GRANT

State  
AL

Zip Code  
35747-8496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

599.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.564635

Amount of Each Receipt this Period

0.95

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
SANDERSON, JAMIE, , ,

**C.** Mailing Address 422 MINI FARM ROAD

City  
GRANT

State  
AL

Zip Code  
35747-8496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

599.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11A.565216

Amount of Each Receipt this Period

599.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

699.95

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SINANDER, MARGO, WHITNEY, ,

**A.**

Mailing Address P.O. BOX 1244

City

CEDAR GLEN

State

CA

Zip Code

92321-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 14 2025

Transaction ID : SA11A.565152

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SINANDER, MARGO, WHITNEY, ,

**B.**

Mailing Address P.O. BOX 1244

City

CEDAR GLEN

State

CA

Zip Code

92321-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 14 2025

Transaction ID : SA11A.565153

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SINANDER, MARGO, WHITNEY, ,

**C.**

Mailing Address P.O. BOX 1244

City

CEDAR GLEN

State

CA

Zip Code

92321-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 14 2025

Transaction ID : SA11A.565154

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

75.00



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SOSNICK, NIKKE, , ,

**A.**

Mailing Address 510 PAJARO COURT

City

SACRAMENTO

State

CA

Zip Code

95864-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 20 2025

Transaction ID : SA11A.565190

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SPEECE, EMILY, , ,

**B.**

Mailing Address 307 SMITHSON STREET

City

DEXTER CITY

State

OH

Zip Code

45727-9749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565194

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

VEIGLE, JIM, , MR.,

**C.**

Mailing Address 1301 WEST FAIRBANKS AVENUE

City

WINTER PARK

State

FL

Zip Code

32789-4803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 18 2025

Transaction ID : SA11A.565201

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

200.00

**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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

WRIGHT, RICHARD, , ,

**A.**

Mailing Address 83 SEA FERN DRIVE

City

LEESBURG

State

FL

Zip Code

34788-8638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11A.565178

Amount of Each Receipt this Period

44.65

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ZIMMERMAN, JEAN, , MS.,

**B.**

Mailing Address 60 SEAGATE DR APT 1101

City

NAPLES

State

FL

Zip Code

34103-2443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 15 2025

Transaction ID : SA11A.565205

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 03 2025

Transaction ID : SA11C.565386

Amount of Each Receipt this Period

12459.90

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

144.65

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ALSTON, DAVID, , ,

**A.**

Mailing Address 17630 N GOLDWATER DR.

City  
SURPRISEState  
AZZip Code  
85374-2970FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISITING ANGELDOccupation  
CAREGIVER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565720

Amount of Each Receipt this Period

99.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

BANGERT, MARILYN, , MS.,

Mailing Address 8713 US HWY 85

City  
FORT LUPTONState  
COZip Code  
80621-9309FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 24 2025

Transaction ID : SA11A.565721

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

BUCKNO, ANDREA, , ,

Mailing Address 916 N. 21ST STREET

City  
ALLENTOWNState  
PAZip Code  
18104-3706FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOT APPLICABLEOccupation  
DISABILITY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : SA11A.565681

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

224.00

**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  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CARUSO, JASON, , MR.,

**A.**

Mailing Address 855 SUMMIT RD

City

NEW RICHMOND

State

WI

Zip Code

54017-1443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BURGER BROS

Occupation

OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

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

Transaction ID : SA11A.565703

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

CONNORS, PETER, , ,

Mailing Address 190 RIDGEWOOD RD

City

RADNOR

State

PA

Zip Code

19087-2845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REMCON

Occupation

MANAGER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	5

Transaction ID : SA11A.565723

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

DEL RIEGO, EDUARDO, , ,

Mailing Address 201 ALHAMBRA CIRCLE, SUITE 711

City

MIAMI

State

FL

Zip Code

33134-5108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EDR INTERNATIONAL

Occupation

EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

Transaction ID : SA11A.565726

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

2649.50

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**Full Name (Last, First, Middle Initial)  
FORSYTHE, GERALD, R., MR.,

Mailing Address 1111 WILLIS AVE

City  
WHEELINGState  
ILZip Code  
60090-5816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDECK ENERGY SERVICESOccupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5005.99

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		26		2025

Transaction ID : SA11A.565552

Amount of Each Receipt this Period

5.99

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
FORSYTHE, GERALD, R., MR.,

Mailing Address 1111 WILLIS AVE

City  
WHEELINGState  
ILZip Code  
60090-5816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDECK ENERGY SERVICESOccupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5005.99

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		26		2025

Transaction ID : SA11A.565727

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTIONEARMARKED FROM WINRED; SEE  
REDESIGNATIONFull Name (Last, First, Middle Initial)  
FORSYTHE, GERALD, R., MR.,

Mailing Address 1111 WILLIS AVE

City  
WHEELINGState  
ILZip Code  
60090-5816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDECK ENERGY SERVICESOccupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5005.99

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		04		2025

Transaction ID : SA11A.565746

Amount of Each Receipt this Period

- 1505.99

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

5005.99

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)  
FORSYTHE, GERALD, R., MR.,

**A.**

Mailing Address 1111 WILLIS AVE

City  
WHEELING

State  
IL

Zip Code  
60090-5816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDECK ENERGY SERVICES

Occupation  
CEO

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5005.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 04 2025

Transaction ID : SA11A.565747

Amount of Each Receipt this Period

1505.99

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)  
HALE, LARRY, , MR.,

**B.**

Mailing Address 7835 MUDVILLE

City  
MILLINGTON

State  
TN

Zip Code  
38053-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 22 2025

Transaction ID : SA11A.565704

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
HILL, VERNON, W., , II

**C.**

Mailing Address 50 SOUTH 16TH STREET  
SUITE 2400

City  
PHILADELPHIA

State  
PA

Zip Code  
19102-2526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL CO

Occupation  
INVESTOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565719

Amount of Each Receipt this Period

95.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

144.50

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KIRKPATRICK, JEANNE, , ,

**A.**

Mailing Address 661 HARRISON AVE

City

GLENDSIDE

State

PA

Zip Code

19038-2505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GROCERY STORE

Occupation

WORKER

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.565714

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MANNO, JOHN, , ,

**B.**

Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

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

Transaction ID : SA11A.565725

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

NIELSEN, DONALD, , ,

**C.**

Mailing Address 107 GEIL ST., P.O. BOX 4171

City

SALINAS

State

CA

Zip Code

93912-4171

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L. NIELSEN ENTERPRISES, INC

Occupation

TRANSPORTATION

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.50

Date of Receipt

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

Transaction ID : SA11A.565724

Amount of Each Receipt this Period

237.50

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

537.50
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

O'STEEN, TOM, , ,

**A.**

Mailing Address 5107 PIRATES COVE ROAD

City  
JACKSONVILLE

State  
FL

Zip Code  
32210-8311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
AUTO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565711

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**B.**

Mailing Address 1717 FREEDOM DR

City  
MELBOURNE

State  
FL

Zip Code  
32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565699

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

RANKIN, DOUGLAS, , MR.,

**C.**

Mailing Address 2335 TAMIAMI TRAIL  
SUITE 308

City  
NAPLES

State  
FL

Zip Code  
34103-4458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 27 2025

Transaction ID : SA11A.565706

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

130.00



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ROE, JOAN, ELLEN, MS.,

**A.**

Mailing Address 360 W NOKOMIS CT

City

MILWAUKEE

State

WI

Zip Code

53217-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565713

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ROE, JOAN, ELLEN, MS.,

**B.**

Mailing Address 360 W NOKOMIS CT

City

MILWAUKEE

State

WI

Zip Code

53217-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 20 2025

Transaction ID : SA11A.565718

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

STORY, VICTOR, B., MR., JR.

**C.**

Mailing Address P.O. BOX 857

City

BABSON PARK

State

FL

Zip Code

33827-0857

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 22 2025

Transaction ID : SA11A.565716

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

150.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)  
WILKERSON, WILLIAM, A., MR.,

**A.** Mailing Address 2810 E OAKLAND PARK BLVD STE 308

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33306-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCT INI INC

Occupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 23 2025

Transaction ID : SA11A.565722

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
WINRED

**B.** Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 10 2025

Transaction ID : SA11C.565948

Amount of Each Receipt this Period

6767.74

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)  
BRYANT, MARY, D., MS.,

**C.** Mailing Address 1700 PARK SHORE RD

City  
LA GRANGE

State  
KY

Zip Code  
40031-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : SA11A.566248

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CANTRELL, JOHN, , MR.,

**A.**

Mailing Address 433 HARRISON AVE

City

PANAMA CITY

State

FL

Zip Code

32401-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		06		2025

Transaction ID : SA11A.566273

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

DILORENZO, ESTHER, , ,

Mailing Address 46309 CORDOBA DRIVE

City

NOVI

State

MI

Zip Code

48374-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2025

Transaction ID : SA11A.566238

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

RANCHER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2025

Transaction ID : SA11A.566201

Amount of Each Receipt this Period

20.24

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

145.24

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

HENLEY, DOY, , ,

**A.**

Mailing Address 14251 MIMOSA LN.

City  
TUSTINState  
CAZip Code  
92780-2334FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2025

Transaction ID : SA11A.566282

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

HILL, VERNON, W., , II

Mailing Address 50 SOUTH 16TH STREET  
SUITE 2400City  
PHILADELPHIAState  
PAZip Code  
19102-2526FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL COOccupation  
INVESTOR

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		27		2025

Transaction ID : SA11A.566272

Amount of Each Receipt this Period

95.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City  
DELRAY BEACHState  
FLZip Code  
33484-8824FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		02		2025

Transaction ID : SA11A.566233

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

620.00

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

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

**A.**

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City

DELRAY BEACH

State

FL

Zip Code

33484-8824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : SA11A.566243

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MANNO, JOHN, , ,

**B.**

Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 01 2025

Transaction ID : SA11A.566204

Amount of Each Receipt this Period

20.24

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MORERA, RAFAEL, , ,

**C.**

Mailing Address 60 EDGEWATER DR APT 14C

City

CORAL GABLES

State

FL

Zip Code

33133-6975

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 27 2025

Transaction ID : SA11A.566283

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

1045.24

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NAYLON, JENNIFER, , ,

**A.**

Mailing Address 5808 HIGHCLIFFE COURT

City

THOUSAND OAKS

State

CA

Zip Code

91362-5247

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	5

Transaction ID : SA11A.566271

Amount of Each Receipt this Period

75.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

OGDEN, JAMES, , MR.,

Mailing Address 118 E OCEAN AVE

City

EDGEWATER

State

FL

Zip Code

32132-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11A.566278

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

PAYNE, JOHN, , MR.,

Mailing Address 9900 NORTHEAST 114TH CIRCLE

City

VANCOUVER

State

WA

Zip Code

98662-1588

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PET HEALTH INNOVATIONS, LLC

Occupation

CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

Transaction ID : SA11A.566275

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

275.00

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**A.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : SA11A.566269

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 01 2025

Transaction ID : SA11A.566276

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

RATLIFF, DONALD, , ,

Mailing Address 1812 RATLIFF RD

City

BIG STONE GAP

State

VA

Zip Code

24219-4572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 06 2025

Transaction ID : SA11A.566274

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

250.00

**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  
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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHULCZ, ARTHUR, A., MR., SR.

A.

Mailing Address 21043 HONEYCREEPER PL.

City  
LEESBURG

State  
VA

Zip Code  
20175-6598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 01 2025

Transaction ID : SA11A.566081

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

SCHULCZ, ARTHUR, A., MR., SR.

Mailing Address 21043 HONEYCREEPER PL.

City  
LEESBURG

State  
VA

Zip Code  
20175-6598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 04 2025

Transaction ID : SA11A.566265

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

SCHULTZ, DONNA, , MS.,

Mailing Address 4801 ZINFANDEL LN

City  
BAKERSFIELD

State  
CA

Zip Code  
93306-1859

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : SA11A.566244

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

80.00



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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SMITH, MERRILL, , ,

**A.**

Mailing Address 1700 SOUTHEAST 9TH STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33316-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INCOMM

Occupation  
EXECUTIVE

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : SA11A.566277

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WADE, EDWARD, , ,

**B.**

Mailing Address 617 N POWELL CIR

City

WICHITA

State

KS

Zip Code

67230-1524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 02 2025

Transaction ID : SA11A.566281

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 19 2025

Transaction ID : SA11C.566847

Amount of Each Receipt this Period

7755.06

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

600.00

**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  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BAIRD, NELSON, CLIFFORD, ,

**A.**

Mailing Address 1750 NEWTON RD

City

FERRIS

State

TX

Zip Code

75125-9464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

IBM

Occupation

SR CONSULTANT

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 10 2025

Transaction ID : SA11A.567451

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BUCINA, RON, , MR.,

**B.**

Mailing Address 900 POPLAR HILL RD

City

PROSPECT

State

TN

Zip Code

38477-6011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 12 2025

Transaction ID : SA11A.567446

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BUCKNO, ANDREA, , ,

**C.**

Mailing Address 916 N. 21ST STREET

City

ALLENTOWN

State

PA

Zip Code

18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT APPLICABLE

Occupation

DISABILITY

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M M / D D / Y Y Y Y Y  
03 09 2025

Transaction ID : SA11A.567423

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

170.00

**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

FEIGENBAUM, ROBERT, , ,

**A.** Mailing Address 339 AVALON DRIVECity  
SOUTH SAN FRANCISCOState  
CAZip Code  
94080-5604FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COVENANT AVIATION SECURITYOccupation  
TRANSPORTATION SECURITY OFFICER

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	2	5

Transaction ID : SA11A.567456

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

FERRONI, TONI, , ,

**B.** Mailing Address 635 SEGOVIA ROADCity  
ST. AUGUSTINEState  
FLZip Code  
32086-6455FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	5

Transaction ID : SA11A.567458

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MALONE, CARMEN, , ,

**C.** Mailing Address 132 ANNANDALE PKWY. EASTCity  
MADISONState  
MSZip Code  
39110-7955FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	5

Transaction ID : SA11A.567432

Amount of Each Receipt this Period

42.75

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

1292.75
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MCCABE, DANIEL, , MR.,

**A.**

Mailing Address 239 WEST TRAIL

City  
STAMFORDState  
CTZip Code  
06903-2407FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.567450

Amount of Each Receipt this Period

95.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

MILLER, CHERYL, L., MRS.,

Mailing Address 6574 PERSIMMON WAY

City  
LIBERTYVILLEState  
ILZip Code  
60048-9476FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.566924

Amount of Each Receipt this Period

1.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

MILLER, CHERYL, L., MRS.,

Mailing Address 6574 PERSIMMON WAY

City  
LIBERTYVILLEState  
ILZip Code  
60048-9476FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 10 2025

Transaction ID : SA11A.567204

Amount of Each Receipt this Period

6.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

102.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MILLER, CHERYL, L., MRS.,

**A.**

Mailing Address 6574 PERSIMMON WAY

City

LIBERTYVILLE

State

IL

Zip Code

60048-9476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	2	5

Transaction ID : SA11A.567454

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

MILLER, CHERYL, L., MRS.,

Mailing Address 6574 PERSIMMON WAY

City

LIBERTYVILLE

State

IL

Zip Code

60048-9476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

Transaction ID : SA11A.567455

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

NEMEROFF, EILEEN, , ,

Mailing Address 20 POND CROSSING

City

SOUTHAMPTON

State

NY

Zip Code

11968-4728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

403.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	5

Transaction ID : SA11A.567294

Amount of Each Receipt this Period

18.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

218.00

**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  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NEWBY, THERESA, , ,

**A.**

Mailing Address 6127 TREVINO AVENUE

City

LAS VEGAS

State

NV

Zip Code

89131-5926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.567453

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

NEWELL, GUY, , MR.,

**B.**

Mailing Address 1830 MANGO ST NE

City

PALM BAY

State

FL

Zip Code

32905-3335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRS

Occupation

ENGINEER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.567447

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**C.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : SA11A.567445

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

200.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**A.**

Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 07 2025

Transaction ID : SA11A.567449

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

RAFFENSBERGER, VERN, E., ,

**B.**

Mailing Address 214 GLEN ROCK RD

City

GLEN ROCK

State

PA

Zip Code

17327-8300

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2025

Transaction ID : SA11A.567452

Amount of Each Receipt this Period

95.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ROBINSON, MARGARET, , ,

**C.**

Mailing Address 21650 PASEO MARAVIA

City

MISSION VIEJO

State

CA

Zip Code

92692-4963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 11 2025

Transaction ID : SA11A.567444

Amount of Each Receipt this Period

49.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

194.50

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHULTZ, DONNA, , MS.,

**A.**

Mailing Address 4801 ZINFANDEL LN

City

BAKERSFIELD

State

CA

Zip Code

93306-1859

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 12 2025

Transaction ID : SA11A.567414

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

**B.**

Mailing Address 12505 TABOR OAKS DR

City

AUSTIN

State

TX

Zip Code

78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 12 2025

Transaction ID : SA11A.567391

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

TRABUE, NELSON, , ,

**C.**

Mailing Address 920 TRABUE DRIVE

City

ASHLAND CITY

State

TN

Zip Code

37015-4929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2025

Transaction ID : SA11A.567433

Amount of Each Receipt this Period

42.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

91.50



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

YORK, DOUGLAS, , ,

**A.**

Mailing Address 6300 E KEIM DR

City

PARADISE VALLEY

State

AZ

Zip Code

85253-4275

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EWING

Occupation

PRESIDENT

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	5

Transaction ID : SA11A.567457

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

Transaction ID : SA11C.568207

Amount of Each Receipt this Period

3907.55

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD**C.**

Full Name (Last, First, Middle Initial)

BRYANT, MARY, D., MS.,

Mailing Address 1700 PARK SHORE RD

City

LA GRANGE

State

KY

Zip Code

40031-8024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : SA11A.568380

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

275.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BUCKNO, ANDREA, , ,

**A.**

Mailing Address 916 N. 21ST STREET

City

ALLENTOWN

State

PA

Zip Code

18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT APPLICABLE

Occupation

DISABILITY

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M M / D D / Y Y Y Y Y  
03 15 2025

Transaction ID : SA11A.568394

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CATION, LANNIE, , DR.,

**B.**

Mailing Address 720 TRILLIUM STREET

City

LEBANON

State

IN

Zip Code

46052-1693

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ASCENSION ST VINCENT

Occupation

PHYSICIAN

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 14 2025

Transaction ID : SA11A.568411

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

DANGELAS, MAYA, , ,

**C.**

Mailing Address 11434 GALLANT RIDGE LANE

City

HOUSTON

State

TX

Zip Code

77082-6817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US GLOBAL INSTITUTE

Occupation

EDUCATOR

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 18 2025

Transaction ID : SA11A.568420

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

325.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**A.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RANCHER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2025

Transaction ID : SA11A.568404

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

EAST, ALICE, , ,

**B.**

Mailing Address P.O. BOX 56

City

LINN

State

TX

Zip Code

78563-0056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
RANCHER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

823.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2025

Transaction ID : SA11A.568412

Amount of Each Receipt this Period

99.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

FULDNER, CHRIS, T., MR.,

**C.**

Mailing Address 5035 STONEGATE CT

City

SPRINGFIELD

State

MO

Zip Code

65809-4013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 15 2025

Transaction ID : SA11A.568405

Amount of Each Receipt this Period

49.50

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

198.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KANE, LESLIE, , ,

**A.**

Mailing Address 14824 ENCLAVE PRESERVE CIR. C3

City

DELRAY BEACH

State

FL

Zip Code

33484-8824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 17 2025

Transaction ID : SA11A.568345

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LAPELLE, RYAN, , ,

**B.**

Mailing Address 34 NATALIE LN

City

LAKE ZURICH

State

IL

Zip Code

60047-1770

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PIER 25 CAPITAL

Occupation

CONSULTANT

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.99

Date of Receipt

M M / D D / Y Y Y Y Y  
03 19 2025

Transaction ID : SA11A.568419

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PALMER, GENEVA SUE, , ,

**C.**

Mailing Address 7952 HUNTERS BEND COVE

City

OLIVE BRANCH

State

MS

Zip Code

38654-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.72

Date of Receipt

M M / D D / Y Y Y Y Y  
03 20 2025

Transaction ID : SA11A.568362

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

293.75

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PATTERSON, JESSICA, , ,

**A.**

Mailing Address 1351 EMERALD CIRCLE

City

SOUTHLAKE

State

TX

Zip Code

76092-3305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AA

Occupation

FLIGHT ATTENDANT

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2025D D / Y Y Y Y Y  
17 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11A.568414

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

PIOTROWSKI, DENNIS, , MR.,

Mailing Address 496 WINDING WILLOW DRIVE

City

PALM HARBOR

State

FL

Zip Code

34683-5835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2025D D / Y Y Y Y Y  
15 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11A.568416

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

RODRIGUEZ, RAFAEL, , PROF.,

Mailing Address P.O. BOX 363185

City

SAN JUAN

State

PR

Zip Code

00936-3185

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNIVERSITY OF PUERTO RICO

Occupation

PROFESSOR

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2025D D / Y Y Y Y Y  
14 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11A.568417

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

300.00

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SMITH, DENNIS, , ,

**A.**

Mailing Address 34073 E 740RD

City

WAGONER

State

OK

Zip Code

74467-9433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

281.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

Transaction ID : SA11A.568287

Amount of Each Receipt this Period

5.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

SOSNICK, NIKKE, , ,

Mailing Address 510 PAJARO COURT

City

SACRAMENTO

State

CA

Zip Code

95864-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	5

Transaction ID : SA11A.568406

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

SPEECE, EMILY, , ,

Mailing Address 307 SMITHSON STREET

City

DEXTER CITY

State

OH

Zip Code

45727-9749

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : SA11A.568409

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

105.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

VEIGLE, JIM, , MR.,

**A.**

Mailing Address 1301 WEST FAIRBANKS AVENUE

City

WINTER PARK

State

FL

Zip Code

32789-4803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2025

Transaction ID : SA11A.568413

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

142123.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2025

Transaction ID : SA11C.568571

Amount of Each Receipt this Period

3279.74

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

ALSTON, DAVID, , ,

**C.**

Mailing Address 17630 N GOLDWATER DR.

City

SURPRISE

State

AZ

Zip Code

85374-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VISITING ANGELD

Occupation

CAREGIVER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 23 2025

Transaction ID : SA11A.568775

Amount of Each Receipt this Period

99.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

199.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CARUSO, JASON, , MR.,

**A.**

Mailing Address 855 SUMMIT RD

City

NEW RICHMOND

State

WI

Zip Code

54017-1443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BURGER BROS

Occupation

OWNER

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

Transaction ID : SA11A.568761

Amount of Each Receipt this Period

49.50

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**B.**

Full Name (Last, First, Middle Initial)

CONNORS, PETER, , ,

Mailing Address 190 RIDGEWOOD RD

City

RADNOR

State

PA

Zip Code

19087-2845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REMCON

Occupation

MANAGER

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	2	5

Transaction ID : SA11A.568778

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

**C.**

Full Name (Last, First, Middle Initial)

HALE, LARRY, , MR.,

Mailing Address 7835 MUDVILLE

City

MILLINGTON

State

TN

Zip Code

38053-4703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

247.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	2	5

Transaction ID : SA11A.568762

Amount of Each Receipt this Period

49.50

☐ Memo Item  
 CONTRIBUTION

EARMARKED FROM WINRED

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

199.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KIRKPATRICK, JEANNE, , ,

**A.**

Mailing Address 661 HARRISON AVE

City

GLENSIDE

State

PA

Zip Code

19038-2505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GROCERY STORE

Occupation  
WORKER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 22 2025

Transaction ID : SA11A.568771

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MANNO, JOHN, , ,

**B.**

Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 25 2025

Transaction ID : SA11A.568779

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

O'STEEN, TOM, , ,

**C.**

Mailing Address 5107 PIRATES COVE ROAD

City

JACKSONVILLE

State

FL

Zip Code

32210-8311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
AUTO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 23 2025

Transaction ID : SA11A.568769

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

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

350.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

POWELL, SCOTT, , MR.,

**A.** Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	5	

Transaction ID : SA11A.568758

Amount of Each Receipt this Period

30.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**B.** Full Name (Last, First, Middle Initial)  
POWELL, SCOTT, , MR.,  
Mailing Address 1717 FREEDOM DR

City

MELBOURNE

State

FL

Zip Code

32940-6714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	5	

Transaction ID : SA11A.568776

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C.** Full Name (Last, First, Middle Initial)  
RANKIN, DOUGLAS, , MR.,  
Mailing Address 2335 TAMIAMI TRAIL  
SUITE 308

City

NAPLES

State

FL

Zip Code

34103-4458

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	5	

Transaction ID : SA11A.568764

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

180.00

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ROE, JOAN, ELLEN, MS.,

**A.** Mailing Address 360 W NOKOMIS CT

City

MILWAUKEE

State

WI

Zip Code

53217-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 23 2025

Transaction ID : SA11A.568770

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ROE, JOAN, ELLEN, MS.,

**B.** Mailing Address 360 W NOKOMIS CT

City

MILWAUKEE

State

WI

Zip Code

53217-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 20 2025

Transaction ID : SA11A.568774

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

STORY, VICTOR, B., MR., JR.

**C.** Mailing Address P.O. BOX 857

City

BABSON PARK

State

FL

Zip Code

33827-0857

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 22 2025

Transaction ID : SA11A.568772

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

150.00

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

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)  
WILKERSON, WILLIAM, A., MR.,

A. Mailing Address 2810 E OAKLAND PARK BLVD STE 308

City  
FORT LAUDERDALE

State  
FL

Zip Code  
33306-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BCT INI INC

Occupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 23 2025

Transaction ID : SA11A.568777

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)  
WILLIAMS, ANGELA, H., MS.,

B. Mailing Address 3473 SATELLITE BLVD., SUITE 211

City  
DULUTH

State  
GA

Zip Code  
30096-8691

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 26 2025

Transaction ID : SA11A.568766

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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)..... ▶

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

150.00

88778.02

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCOTT, RICK, , SENATOR,

**A.**

Mailing Address P.O. BOX 130708

City

TAMPA

State

FL

Zip Code

33681

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US SENATE

Occupation

US SENATOR

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

27641.67

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11D.1309

Amount of Each Receipt this Period

3300.00

☐ Memo Item

IN-KIND: FACILITY RENTAL

218 MD LLC 340 9TH NAPLES FL 34102

**B.**

Full Name (Last, First, Middle Initial)

SCOTT, RICK, , SENATOR,

Mailing Address P.O. BOX 130708

City

TAMPA

State

FL

Zip Code

33681

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US SENATE

Occupation

US SENATOR

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

27641.67

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11D.1311

Amount of Each Receipt this Period

22691.67

☐ Memo Item

IN-KIND: AIR -COLUMBIA COLLIER MGT 340 9

AIR CHARTER 2-7 THRU 3-28

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

25991.67

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

25991.67

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**RICK SCOTT VICTORY FUND****A.**

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.**C** C00676957

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5242.09

Date of Receipt

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

**Transaction ID : SA12.565807**

Amount of Each Receipt this Period

250.81

☐ Memo Item

TRANSFER

CLOSE OUT TRAN 2024 CYCLE AND GROSS  
ALLOCATION TO RSFF WAS 22500 PRIOR NET**B.**

Full Name (Last, First, Middle Initial)

**RICK SCOTT VICTORY FUND**

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.**C** C00676957

Name of Employer

Occupation

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5242.09

Date of Receipt

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

**Transaction ID : SA12.565808**

Amount of Each Receipt this Period

205.21

☐ Memo Item

TRANSFER

CLOSE OUT TRAN 2024 CYCLE AND GROSS  
ALLOCATION TO RSFF WAS 22500 PRIOR NET**C.**

Full Name (Last, First, Middle Initial)

**RICK SCOTT VICTORY FUND**

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.**C** C00676957

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1072658.45

Date of Receipt

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

**Transaction ID : SA12.565809**

Amount of Each Receipt this Period

387.61

☐ Memo Item

TRANSFER

CLOSE OUT TRAN 2024 CYCLE AND GROSS  
ALLOCATION TO RSFF WAS 22500 PRIOR NET**SUBTOTAL** of Receipts This Page (optional)..... ▶

843.63

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**RICK SCOTT VICTORY FUND****A.**

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.**C** C00676957

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1072658.45

Date of Receipt

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

**Transaction ID : SA12.565810**

Amount of Each Receipt this Period

866.43

☐ Memo Item

TRANSFER

CLOSE OUT TRAN 2024 CYCLE AND GROSS  
ALLOCATION TO RSFF WAS 22500 PRIOR NET**B.**

Full Name (Last, First, Middle Initial)

**TEAM RICK SCOTT**

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.**C** C00692343

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210606.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	2	5

**Transaction ID : SA12.569460**

Amount of Each Receipt this Period

99300.99

☐ Memo Item

TRANSFER

TEAM RICK SCOTT JFC MEMO

**C.**

Full Name (Last, First, Middle Initial)

**ALFAISAL, FAHD, , ,**

Mailing Address 9424 CHEROKEE

City

BEVERLY HILLS

State

CA

Zip Code

90210-1704

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

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1055.00

Date of Receipt

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

**Transaction ID : SA.559507.20.402**

Amount of Each Receipt this Period

250.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

100167.42

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ALFAISAL, FAHD, , ,

**A.**

Mailing Address 9424 CHEROKEE

City

BEVERLY HILLS

State

CA

Zip Code

90210-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1055.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

Transaction ID : SA.560120.20.402

Amount of Each Receipt this Period

250.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

ALFAISAL, FAHD, , ,

Mailing Address 9424 CHEROKEE

City

BEVERLY HILLS

State

CA

Zip Code

90210-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1055.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

Transaction ID : SA.561487.20.402

Amount of Each Receipt this Period

50.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

ALFAISAL, FAHD, , ,

Mailing Address 9424 CHEROKEE

City

BEVERLY HILLS

State

CA

Zip Code

90210-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1055.00

Date of Receipt

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

Transaction ID : SA.563356.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 145 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ALFAISAL, FAHD, , ,

**A.**

Mailing Address 9424 CHEROKEE

City

BEVERLY HILLS

State

CA

Zip Code

90210-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1055.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

Transaction ID : SA.565912.20.402

Amount of Each Receipt this Period

5.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

ALFONSO, DENISE, , ,

Mailing Address 6940 SW 69 AVE

City

MIAMI

State

FL

Zip Code

33143-3129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.560381.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

ALFONSO, MANNY, , ,

Mailing Address 6940 SW 69 AVENUE

City

MIAMI

State

FL

Zip Code

33143-3129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE A GROUP CORP

Occupation

OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.560382.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ALSTON, DAVID, , ,

**A.**

Mailing Address 17630 N GOLDWATER DR.

City  
SURPRISE

State  
AZ

Zip Code  
85374-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISITING ANGELD

Occupation  
CAREGIVER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 13 / 2025

Transaction ID : SA.559915.20.402

Amount of Each Receipt this Period

0.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

ALSTON, DAVID, , ,

**B.**

Mailing Address 17630 N GOLDWATER DR.

City  
SURPRISE

State  
AZ

Zip Code  
85374-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISITING ANGELD

Occupation  
CAREGIVER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2025

Transaction ID : SA.563305.20.402

Amount of Each Receipt this Period

0.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

ANTHONY, JOHN, A., MR.,

**C.**

Mailing Address 100 S ASHLEY DR  
SUITE 1600

City  
TAMPA

State  
FL

Zip Code  
33602-5318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANTHONY AND PARTNERS

Occupation  
ATTORNEY AT LAW

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 03 / 2025

Transaction ID : SA.559413.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ARTMAN, MARVIN, W., MR.,

**A.** Mailing Address 6845 SW COUNTY ROAD 225

City  
STARKE

State  
FL

Zip Code  
32091-6621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 13 2025

Transaction ID : SA.560119.20.402

Amount of Each Receipt this Period

100.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

ARTMAN, MARVIN, W., MR.,

**B.** Mailing Address 6845 SW COUNTY ROAD 225

City  
STARKE

State  
FL

Zip Code  
32091-6621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2025

Transaction ID : SA.564290.20.402

Amount of Each Receipt this Period

100.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

ARTMAN, MARVIN, W., MR.,

**C.** Mailing Address 6845 SW COUNTY ROAD 225

City  
STARKE

State  
FL

Zip Code  
32091-6621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 19 2025

Transaction ID : SA.567592.20.402

Amount of Each Receipt this Period

100.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BARBOUR, HALEY, , HON.,

**A.** Mailing Address 648 DOGWOOD DR.

City

YAZOO CITY

State

MS

Zip Code

39194-8205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FORTRESS CONSULTING LLC

Occupation

OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	2	5

Transaction ID : SA.566820.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

PARTNERSHIP ATTRIB: FORTRESS CONSULTING  
LLC

Full Name (Last, First, Middle Initial)

BARRON, BRUCE, N., MR.,

**B.** Mailing Address 6958 GREENTREE DR.

City

NAPLES

State

FL

Zip Code

34108-7519

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ORIGIN VENTURES

Occupation

CO-FOUNDER AND PRINCIPAL

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	9	/	2	0	2	5

Transaction ID : SA.559876.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

BEASLEY, CAROLINE, , MS.,

**C.** Mailing Address 3033 RIVIERA DRIVE

City

NAPLES

State

FL

Zip Code

34103-2752

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BEASLEY MEDIA GROUP

Occupation

CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	2	4

Transaction ID : SA.560731.20.402

Amount of Each Receipt this Period

- 3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , MR.,

A.

Mailing Address P.O. BOX 207

City

CHINA

State

TX

Zip Code

77613-0207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2025

Transaction ID : SA.566842.20.402

Amount of Each Receipt this Period

450.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , MR.,

B.

Mailing Address P.O. BOX 207

City

CHINA

State

TX

Zip Code

77613-0207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2025

Transaction ID : SA.569200.20.402

Amount of Each Receipt this Period

450.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

BRITTON, GREG, , MR.,

C.

Mailing Address 2078 BAHAMA DR

City

NAVARRE

State

FL

Zip Code

32566-7696

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVARRE FAMILY WATERSPORTS

Occupation

RENTAL BUSINESS

Receipt For: 2030

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2025

Transaction ID : SA.561399.20.402

Amount of Each Receipt this Period

350.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 150 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BRITTON, GREG, , MR.,

**A.**

Mailing Address 2078 BAHAMA DR

City

NAVARRE

State

FL

Zip Code

32566-7696

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVARRE FAMILY WATERSPORTS

Occupation

RENTAL BUSINESS

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID : SA.565254.20.402

Amount of Each Receipt this Period

350.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

BRITTON, GREG, , MR.,

Mailing Address 2078 BAHAMA DR

City

NAVARRE

State

FL

Zip Code

32566-7696

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVARRE FAMILY WATERSPORTS

Occupation

RENTAL BUSINESS

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	8	/	2	0	2	5

Transaction ID : SA.568463.20.402

Amount of Each Receipt this Period

350.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

BUCKNO, ANDREA, , ,

Mailing Address 916 N. 21ST STREET

City

ALLENTOWN

State

PA

Zip Code

18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT APPLICABLE

Occupation

DISABILITY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

Transaction ID : SA.564286.20.402

Amount of Each Receipt this Period

30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 151 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BUCKNO, ANDREA, , ,

**A.** Mailing Address 916 N. 21ST STREET

City

ALLENTOWN

State

PA

Zip Code

18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT APPLICABLE

Occupation

DISABILITY

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

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

Transaction ID : SA.564584.20.402

Amount of Each Receipt this Period

30.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
BUCKNO, ANDREA, , ,  
Mailing Address 916 N. 21ST STREET

City

ALLENTOWN

State

PA

Zip Code

18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT APPLICABLE

Occupation

DISABILITY

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	5	

Transaction ID : SA.568195.20.402

Amount of Each Receipt this Period

30.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
BUCKNO, ANDREA, , ,  
Mailing Address 916 N. 21ST STREET

City

ALLENTOWN

State

PA

Zip Code

18104-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT APPLICABLE

Occupation

DISABILITY

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.99

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	5	

Transaction ID : SA.568557.20.402

Amount of Each Receipt this Period

30.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 152 OF 316

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

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

DODDS, HELEN, Z., MS.,

**A.**

Mailing Address 4321 SUMMER BREEZE TER

City

VERO BEACH

State

FL

Zip Code

32967-1835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	5

Transaction ID : SA.569271.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

HALLER, DAVID, , ,

**B.**

Mailing Address 4200 NORTH CARLIN SPRINGS ROAD, AP

City

ARLINGTON

State

VA

Zip Code

22203-4209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOLLAND KNIGHT LLP

Occupation

ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA.564585.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

HAYDEN, MARILYN, J., MS.,

**C.**

Mailing Address 10306 E CALLE DE LAS BRISAS

City

SCOTTSDALE

State

AZ

Zip Code

85255-3762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	5

Transaction ID : SA.569346.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**HOLTON, JAMES, W., MR.,****A.** Mailing Address 14311 EAGLE POINTE DRIVE

City

CLEARWATER

State

FL

Zip Code

33762-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HALL BOOTH SMITHOccupation  
ATTORNEY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.560401.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

**HOWES, ALVIN, L., MR.,****B.** Mailing Address 1841 ARBOR KNOLL LOOP

City

TRINITY

State

FL

Zip Code

34655-7205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	2	5

Transaction ID : SA.569370.20.402

Amount of Each Receipt this Period

250.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

**HWA, LILY, , ,****C.** Mailing Address 101 MC LELLAN DR APT 2025

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-7524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
EDUCATION

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	2	5

Transaction ID : SA.569376.20.402

Amount of Each Receipt this Period

800.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 154 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**Full Name (Last, First, Middle Initial)  
JEALOUS, MARGARET, A., MS.,

Mailing Address 6445 RUBIA CIR

City  
APOLLO BEACHState  
FLZip Code  
33572-2917FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED MILITARY

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 19 2025

Transaction ID : SA.569379.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)  
KELLER, ARLEENE, , ,

Mailing Address 8369 LYNNEHAVEN DR

City  
CINCINNATIState  
OHZip Code  
45236-1413FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED R.N.Occupation  
RETIRED R.N.

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 13 2025

Transaction ID : SA.569393.20.402

Amount of Each Receipt this Period

300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)  
KOMADA, ANNA, , MS.,

Mailing Address 7000 RIVER RUN BLVD

City  
WEEKI WACHEEState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559490.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

PAGE 155 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KOMADA, ANNA, , MS.,

**A.** Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA.559492.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
KOMADA, ANNA, , MS.,  
Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

Transaction ID : SA.560960.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
KOMADA, ANNA, , MS.,  
Mailing Address 7000 RIVER RUN BLVD

City

WEEKI WACHEE

State

FL

Zip Code

34607-4051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA.563348.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KOMADA, ANNA, , MS.,

**A.** Mailing Address 7000 RIVER RUN BLVDCity  
WEEKI WACHEEState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 24 2025

Transaction ID : SA.564566.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
KOMADA, ANNA, , MS.,  
Mailing Address 7000 RIVER RUN BLVDCity  
WEEKI WACHEEState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 03 2025

Transaction ID : SA.565356.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
KOMADA, ANNA, , MS.,  
Mailing Address 7000 RIVER RUN BLVDCity  
WEEKI WACHEEState  
FLZip Code  
34607-4051FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 10 2025

Transaction ID : SA.565929.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

PAGE 157 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

**A.**

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559493.20.402

Amount of Each Receipt this Period

10.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y  
02 03 2025

Transaction ID : SA.561469.20.402

Amount of Each Receipt this Period

5.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y  
03 03 2025

Transaction ID : SA.565368.20.402

Amount of Each Receipt this Period

30.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 158 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

**A.**

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2025

Transaction ID : SA.565931.20.402

Amount of Each Receipt this Period

10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

LAI, SUE, , ,

**B.**

Mailing Address 157 HIDDEN RD

City

ANDOVER

State

MA

Zip Code

01810-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2025

Transaction ID : SA.568536.20.402

Amount of Each Receipt this Period

5.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

LEVANG, PATSY, , ,

**C.**

Mailing Address 10841 HWY 73

City

WATFORD CITY

State

ND

Zip Code

58854-9556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

501.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2025

Transaction ID : SA.560795.20.402

Amount of Each Receipt this Period

0.35

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

PAGE 159 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

LEVANG, PATSY, , ,

**A.**

Mailing Address 10841 HWY 73

City

WATFORD CITY

State

ND

Zip Code

58854-9556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

501.75

Date of Receipt

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

Transaction ID : SA.564491.20.402

Amount of Each Receipt this Period

0.35

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

LEVANG, PATSY, , ,

Mailing Address 10841 HWY 73

City

WATFORD CITY

State

ND

Zip Code

58854-9556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

501.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	2	5

Transaction ID : SA.568107.20.402

Amount of Each Receipt this Period

0.35

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

LICCIARDELLO, ROSARIO, , ,

Mailing Address 75677 SPOONBILL LANE

City

YULEE

State

FL

Zip Code

32097-0074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROYALSIL

Occupation

CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	7	/	2	0	2	5

Transaction ID : SA.560407.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

PAGE 160 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**MACKENZIE, SCOTT, R., MR.,****A.**

Mailing Address 4483 GLEN KERNAN PKWY E

City  
JACKSONVILLEState  
FLZip Code  
32224-5629FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
INVESTOR

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.560409.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

**MAHONY, CAROL, S., MRS.,**

Mailing Address 670 LAKE DR

City  
VERO BEACHState  
FLZip Code  
32963-2165FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	2	5

Transaction ID : SA.569440.20.402

Amount of Each Receipt this Period

2000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

**MANNO, JOHN, , ,**

Mailing Address 101 WOODVALE CREEK

City  
BOSSIER CITYState  
LAZip Code  
71111-2285FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	2	5

Transaction ID : SA.560016.20.402

Amount of Each Receipt this Period

2.43

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 161 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MANNO, JOHN, , ,

**A.** Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

Transaction ID : SA.564212.20.402

Amount of Each Receipt this Period

2.43

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

MANNO, JOHN, , ,

Mailing Address 101 WOODVALE CREEK

City

BOSSIER CITY

State

LA

Zip Code

71111-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	5

Transaction ID : SA.567525.20.402

Amount of Each Receipt this Period

2.43

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

MASSOUMI, CYRUS, , ,

Mailing Address 382 NE 191ST ST, #42690

City

MIAMI

State

FL

Zip Code

33179-3899

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUMBITION

Occupation

ENTREPRENEUR INVESTOR

Receipt For: 2030

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : SA.564586.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

**A.** Mailing Address P.O. BOX 246

City  
RICHLAND

State  
GA

Zip Code  
31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559488.20.402

Amount of Each Receipt this Period

6.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

**B.** Mailing Address P.O. BOX 246

City  
RICHLAND

State  
GA

Zip Code  
31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA.560958.20.402

Amount of Each Receipt this Period

7.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

**C.** Mailing Address P.O. BOX 246

City  
RICHLAND

State  
GA

Zip Code  
31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA.560968.20.402

Amount of Each Receipt this Period

10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 163 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

A. Mailing Address P.O. BOX 246

City  
RICHLAND

State  
GA

Zip Code  
31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA.560974.20.402

Amount of Each Receipt this Period

12.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

B. Mailing Address P.O. BOX 246

City  
RICHLAND

State  
GA

Zip Code  
31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA.560978.20.402

Amount of Each Receipt this Period

18.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MCLENDON, MARGARET, , ,

C. Mailing Address P.O. BOX 246

City  
RICHLAND

State  
GA

Zip Code  
31825-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1097.59

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA.560995.20.402

Amount of Each Receipt this Period

85.50

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MELGES, LAURA, L., MS.,

**A.** Mailing Address 378 13TH AVE SOUTH

City  
NAPLES

State  
FL

Zip Code  
34102-7213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MONOGRAM GOODS

Occupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2025

Transaction ID : SA.559508.20.402

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MEREDITH, RANDY, , ,

**B.** Mailing Address 266 BULLFINCH RD

City  
MOORESVILLE

State  
NC

Zip Code  
28117-5407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 13 / 2025

Transaction ID : SA.560091.20.402

Amount of Each Receipt this Period

6.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MEREDITH, RANDY, , ,

**C.** Mailing Address 266 BULLFINCH RD

City  
MOORESVILLE

State  
NC

Zip Code  
28117-5407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.23

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2025

Transaction ID : SA.560972.20.402

Amount of Each Receipt this Period

10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MEREDITH, RANDY, , ,

**A.**

Mailing Address 266 BULLFINCH RD

City

MOORESVILLE

State

NC

Zip Code

28117-5407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

328.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

Transaction ID : SA.560991.20.402

Amount of Each Receipt this Period

30.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

METZ, HARRY, A., MR.,

Mailing Address 205 FIDDLERS POINT DR

City

ST AUGUSTINE

State

FL

Zip Code

32080-6134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	5

Transaction ID : SA.569458.20.402

Amount of Each Receipt this Period

225.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

MILES, JUANITA, R., MRS.,

Mailing Address 12035 HAZELHURST DR

City

CINCINNATI

State

OH

Zip Code

45240-1237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	5

Transaction ID : SA.568065.20.402

Amount of Each Receipt this Period

75.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MILES, JUANITA, R., MRS.,

**A.** Mailing Address 12035 HAZELHURST DRCity  
CINCINNATIState  
OHZip Code  
45240-1237FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 18 2025

Transaction ID : SA.568982.20.402

Amount of Each Receipt this Period

75.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

MURGADO, MARIO, , MR.,

**B.** Mailing Address 665 SW 8TH STREETCity  
MIAMIState  
FLZip Code  
33130-3308FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRICKELL MOTORSOccupation  
PRESIDENT & CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 13 2025

Transaction ID : SA.560033.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

NOWAK, SUZANNE, , DR.,

**C.** Mailing Address 101 S BAYSHORE BLVDCity  
SAFETY HARBORState  
FLZip Code  
34695-4024FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED M.D.Occupation  
RETIRED PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 17 2025

Transaction ID : SA.566830.20.402

Amount of Each Receipt this Period

200.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NOWAK, SUZANNE, , DR.,

**A.**

Mailing Address 101 S BAYSHORE BLVD

City

SAFETY HARBOR

State

FL

Zip Code

34695-4024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED M.D.

Occupation

RETIRED PHYSICIAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	2	5

Transaction ID : SA.569004.20.402

Amount of Each Receipt this Period

200.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

NUTT, LYND A, J., MRS.,

Mailing Address 6974 NW 50TH STREET

City

MIAMI

State

FL

Zip Code

33166-5632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

NUCLEAR MEDICINE INVENTOR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.560739.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

OLEMBERG, ROBERTO, , ,

Mailing Address 580 GOLDEN BEACH DRIVE

City

GOLDEN BEACH

State

FL

Zip Code

33160-2245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OLEM SHOE CORP

Occupation

OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	2	5

Transaction ID : SA.560118.20.402

Amount of Each Receipt this Period

50.12

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

OLEMBERG, ROBERTO, , ,

**A.**

Mailing Address 580 GOLDEN BEACH DRIVE

City

GOLDEN BEACH

State

FL

Zip Code

33160-2245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OLEM SHOE CORPOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

Transaction ID : SA.564289.20.402

Amount of Each Receipt this Period

50.12

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

OLEMBERG, ROBERTO, , ,

Mailing Address 580 GOLDEN BEACH DRIVE

City

GOLDEN BEACH

State

FL

Zip Code

33160-2245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OLEM SHOE CORPOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	2	5

Transaction ID : SA.567591.20.402

Amount of Each Receipt this Period

50.12

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

OMANOFF, DENNIS, , ,

Mailing Address 3168 WYNDHAM WAY

City

MELBOURNE

State

FL

Zip Code

32940-5980

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEXTGEN TACTICAL, LLCOccupation  
OWNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

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

Transaction ID : SA.559878.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ORR, JOANNE, R., MS.,

**A.**

Mailing Address 19 PAR CLUB CIR

City

BOYNTON BEACH

State

FL

Zip Code

33436-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 07 2025

Transaction ID : SA.569012.20.402

Amount of Each Receipt this Period

3500.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

PALMER, JACK, A., MR., JR.

Mailing Address 26350 WOODLYN DR

City

BONITA SPRINGS

State

FL

Zip Code

34134-5632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 06 2025

Transaction ID : SA.569021.20.402

Amount of Each Receipt this Period

1200.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

PATTERSON, DONALD, R., ,

Mailing Address 3631 SAN REMO TERRACE

City

SARASOTA

State

FL

Zip Code

34239-5816

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559862.20.402

Amount of Each Receipt this Period

3300.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PAYNE, CHRISTOPHER, , ,

**A.**

Mailing Address 220 E STREET NORTHEAST

City

WASHINGTON

State

DC

Zip Code

20002-4923

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CROSS POTOMAC CONSULTING LLC

Occupation

FOUNDER

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2025

Transaction ID : SA.567593.20.402

Amount of Each Receipt this Period

500.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

PAYNE, HOWARD, ., MR.,

**B.**

Mailing Address 12918 YACHT CLUB PL

City

CORTEZ

State

FL

Zip Code

34215-2562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PAYNE LAW GROUP

Occupation

LAWYER

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2025

Transaction ID : SA.568066.20.402

Amount of Each Receipt this Period

100.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

PAYNE, HOWARD, ., MR.,

**C.**

Mailing Address 12918 YACHT CLUB PL

City

CORTEZ

State

FL

Zip Code

34215-2562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PAYNE LAW GROUP

Occupation

LAWYER

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 18 / 2025

Transaction ID : SA.569026.20.402

Amount of Each Receipt this Period

100.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PENCE, ADELAIDE, K., ,

**A.**

Mailing Address 530 S COLLIER BLVD UNIT 802

City

MARCO ISLAND

State

FL

Zip Code

34145-5516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 26 2025

Transaction ID : SA.569029.20.402

Amount of Each Receipt this Period

250.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

PETERS MARITAL, NICHOLAS, , MR.,

Mailing Address 2113 CLIMBING IVY DRIVE

City

TAMPA

State

FL

Zip Code

33618-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROMETHEUS MANAGEMENT/SOUTHEAST

Occupation

CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA.568436.20.402

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

PFAUTCH, ROY, , MR.,

Mailing Address 52 PORTLAND PL

City

SAINT LOUIS

State

MO

Zip Code

63108-1242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CIVIC SERVICE INC

Occupation

EXECUTIVE CONSULTANT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 22 2025

Transaction ID : SA.560737.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

RAUP, JANA, , ,

**A.**

Mailing Address 4441 COBALT DR

City

HARWOOD

State

MD

Zip Code

20776-9621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BCH

Occupation

MENTAL HEALTH THERAPIST

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 03 2025

Transaction ID : SA.561488.20.402

Amount of Each Receipt this Period

100.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

REAMEY, GARY, , ,

Mailing Address 13915 OLD COAST ROAD, PH05

City

NAPLES

State

FL

Zip Code

34110-8715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA.563358.20.402

Amount of Each Receipt this Period

3500.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

SANDERSON, JUDITH, G., MS.,

Mailing Address 18717 MILL VILLA RD SPC 601

City

JAMESTOWN

State

CA

Zip Code

95327-9357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA.568440.20.402

Amount of Each Receipt this Period

100.00



Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SANDERSON, JUDITH, G., MS.,

**A.** Mailing Address 18717 MILL VILLA RD SPC 601City  
JAMESTOWNState  
CAZip Code  
95327-9357FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA.569066.20.402

Amount of Each Receipt this Period

100.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

SANTOS, EDWARD, ALEX, MR.,

Mailing Address 518 PONCA TRAIL

City  
MAITLANDState  
FLZip Code  
32751-3953FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORTRESS INFORMATION SECURITYOccupation  
CEO AND CO-FOUNDER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 17 2025

Transaction ID : SA.560398.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

SCHAFFER, DERACE, , ,

Mailing Address 1100 GRAND ISLE DRIVE

City  
NAPLESState  
FLZip Code  
34108-3325FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
VENTURE CAPITAL

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 10 2025

Transaction ID : SA.565940.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHNAUBELT, CHRIS, , ,

**A.**

Mailing Address 2000 TOWERSIDE TER

City  
MIAMIState  
FLZip Code  
33138-2244FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US ARMYOccupation  
DEAN

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 10 2025

Transaction ID : SA.563357.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

SCHNEIDER, GREGG, , ,

Mailing Address 288 PARKWAY

City  
GOLDEN BEACHState  
FLZip Code  
33160-2219FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559864.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

SCHWARTZEL, CARLY, , ,

Mailing Address 14195 REFLECTION LAKES DR

City  
FORT MYERSState  
FLZip Code  
33907-1810FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559509.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHWARTZEL, JAMES, , ,

A.

Mailing Address 14195 REFLECTION LAKES DR

City

FT MYERS

State

FL

Zip Code

33907-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUN BROADCASTING

Occupation

PRESIDENT

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 06 2025

Transaction ID : SA.559510.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

B.

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

Mailing Address 12505 TABOR OAKS DR

City

AUSTIN

State

TX

Zip Code

78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y  
02 17 2025

Transaction ID : SA.564233.20.402

Amount of Each Receipt this Period

3.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

C.

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

Mailing Address 12505 TABOR OAKS DR

City

AUSTIN

State

TX

Zip Code

78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y  
02 24 2025

Transaction ID : SA.564549.20.402

Amount of Each Receipt this Period

4.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SHIPWASH, MARY, , ,

**A.**

Mailing Address 12505 TABOR OAKS DR

City  
AUSTIN

State  
TX

Zip Code  
78739-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 24 2025

Transaction ID : SA.564552.20.402

Amount of Each Receipt this Period

5.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

SINANDER, MARGO, WHITNEY, ,

**B.**

Mailing Address P.O. BOX 1244

City  
CEDAR GLEN

State  
CA

Zip Code  
92321-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 24 2025

Transaction ID : SA.564567.20.402

Amount of Each Receipt this Period

9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

SINANDER, MARGO, WHITNEY, ,

**C.**

Mailing Address P.O. BOX 1244

City  
CEDAR GLEN

State  
CA

Zip Code  
92321-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 10 2025

Transaction ID : SA.565914.20.402

Amount of Each Receipt this Period

5.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00



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

PAGE 177 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

STEWART, TIM, , ,

**A.**

Mailing Address 984 NORTH WESTSHORE BOULEVARD

City

MANTENO

State

IL

Zip Code

60950-1187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
BUILDER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

Transaction ID : SA.560996.20.402

Amount of Each Receipt this Period

500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

TEAS, CHRISTOPHER, , ,

**B.**

Mailing Address 6 ST JOHNS LANE

City

NEW YORK

State

NY

Zip Code

10013-2115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PARK SOUTH CAPITALOccupation  
MANAGING PARTNER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

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

Transaction ID : SA.560385.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

TEPAS, GARY, L., MR.,

**C.**

Mailing Address 1119 DORMIE DR

City

NAPLES

State

FL

Zip Code

34108-1928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMPLOYED INCOccupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	5

Transaction ID : SA.569120.20.402

Amount of Each Receipt this Period

200.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 178 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

VOCCOLA, FREDERICK, J., ,

**A.**

Mailing Address 200 BISCAYNE BOULEVARD WAY, APT 53

City  
MIAMIState  
FLZip Code  
33131-2167FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KASEYA US SALESOccupation  
VICE CHAIR

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 25 2025

Transaction ID : SA.568435.20.402

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

WHITED, JIMMY, , ,

Mailing Address 3650 KLEBBA LANE

City  
MIAMIState  
FLZip Code  
33133-6833FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WINDHAVEN INSURANCE COMPANYOccupation  
CEO

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 27 2025

Transaction ID : SA.560997.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

WILLIAMS, ANGELA, H., MS.,

Mailing Address 3473 SATELLITE BLVD., SUITE 211

City  
DULUTHState  
GAZip Code  
30096-8691FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 03 2025

Transaction ID : SA.561485.20.402

Amount of Each Receipt this Period

30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 179 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

WILLIAMS, ANGELA, H., MS.,

**A.**

Mailing Address 3473 SATELLITE BLVD., SUITE 211

City  
DULUTHState  
GAZip Code  
30096-8691FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

339.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : SA.568196.20.402

Amount of Each Receipt this Period

250.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

WILSON, PATRICK, , ,

Mailing Address 716 QUEEN STREET

City  
ALEXANDRIAState  
VAZip Code  
22314-2421FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEDIATEK INC.Occupation  
SEMICONDUCTORS

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 10 2025

Transaction ID : SA.565939.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

WINFREE, JAMES, HAMILTON, ,

Mailing Address 354 BAKER ST

City  
KILGOREState  
TXZip Code  
75662-0117FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
TREE PLANTER

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 11 2025

Transaction ID : SA.569165.20.402

Amount of Each Receipt this Period

150.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

PAGE 180 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ZENOS, MARIA, E., MRS.,

A.

Mailing Address 17344 SOUTHWEST 88TH AVENUE

City  
MIAMIState  
FLZip Code  
33157-4535FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 10 2025

Transaction ID : SA.559880.20.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

B.

Full Name (Last, First, Middle Initial)

DISNEY PAC

Mailing Address 425 3RD ST SW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20024-3227FEC ID number of contributing  
federal political committee.

C C00197749

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 22 2025

Transaction ID : SA.560738.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

C.

Full Name (Last, First, Middle Initial)

FORTRESS CONSULTING LLC

Mailing Address 648 DOGWOOD DR.

City  
YAZOO CITYState  
MSZip Code  
39194-8205FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 14 2025

Transaction ID : SA.566819.20.402

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

SEE PARTNERSHIP ATTRIB

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

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

0.00

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

PAGE 181 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**TEAM RICK SCOTT****A.**

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.**C** C00692343

Name of Employer

Occupation

Receipt For: 2030

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

210606.63

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 / 2025

Transaction ID : SA12.569461

Amount of Each Receipt this Period

40134.25

☐ Memo Item

TRANSFER

TEAM RICK SCOTT JFC MEMO

**B.**

Full Name (Last, First, Middle Initial)

**ALFONSO, DENISE, , ,**

Mailing Address 6940 SW 69 AVE

City

MIAMI

State

FL

Zip Code

33143-3129

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

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFC

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2030

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 15 / 2025

Transaction ID : SA.560381.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

**ALFONSO, MANNY, , ,**

Mailing Address 6940 SW 69 AVENUE

City

MIAMI

State

FL

Zip Code

33143-3129

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

Name of Employer

Occupation

THE A GROUP CORP

OWNER

Receipt For: 2030

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 15 / 2025

Transaction ID : SA.560382.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

40134.25

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ANTHONY, JOHN, A., MR.,

**A.**Mailing Address 100 S ASHLEY DR  
SUITE 1600City  
TAMPAState  
FLZip Code  
33602-5318FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANTHONY AND PARTNERSOccupation  
ATTORNEY AT LAW

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 03 2025

Transaction ID : SA.559413.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

BARRON, BRUCE, N., MR.,

Mailing Address 6958 GREENTREE DR.

City  
NAPLESState  
FLZip Code  
34108-7519FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ORIGIN VENTURESOccupation  
CO-FOUNDER AND PRINCIPAL

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 09 2025

Transaction ID : SA.559876.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

BEASLEY, CAROLINE, , MS.,

Mailing Address 3033 RIVIERA DRIVE

City  
NAPLESState  
FLZip Code  
34103-2752FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BEASLEY MEDIA GROUPOccupation  
CEO

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 23 2024

Transaction ID : SA.560731.21.402

Amount of Each Receipt this Period

- 3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

PAGE 183 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**HOLTON, JAMES, W., MR.,****A.** Mailing Address 14311 EAGLE POINTE DRIVE

City

CLEARWATER

State

FL

Zip Code

33762-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HALL BOOTH SMITHOccupation  
ATTORNEY

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 20 / 2025

Transaction ID : SA.560401.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

**MACKENZIE, SCOTT, R., MR.,****B.** Mailing Address 4483 GLEN KERNAN PKWY E

City

JACKSONVILLE

State

FL

Zip Code

32224-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
INVESTOR

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 18 / 2025

Transaction ID : SA.560409.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

**MURGADO, MARIO, , MR.,****C.** Mailing Address 665 SW 8TH STREET

City

MIAMI

State

FL

Zip Code

33130-3308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRICKELL MOTORSOccupation  
PRESIDENT & CEO

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 13 / 2025

Transaction ID : SA.560033.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

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

PAGE 184 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NUTT, LYNDA, J., MRS.,

**A.** Mailing Address 6974 NW 50TH STREETCity  
MIAMIState  
FLZip Code  
33166-5632FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
NUCLEAR MEDICINE INVENTOR

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 24 2025

Transaction ID : SA.560739.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
OMANOFF, DENNIS, , ,

Mailing Address 3168 WYNDHAM WAY

City  
MELBOURNEState  
FLZip Code  
32940-5980FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEXTGEN TACTICAL, LLCOccupation  
OWNER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 10 2025

Transaction ID : SA.559878.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
ORR, JOANNE, R., MS.,

Mailing Address 19 PAR CLUB CIR

City  
BOYNTON BEACHState  
FLZip Code  
33436-5604FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 07 2025

Transaction ID : SA.569012.21.402

Amount of Each Receipt this Period

100.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00



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

PAGE 185 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

PATTERSON, DONALD, R., ,

**A.** Mailing Address 3631 SAN REMO TERRACECity  
SARASOTAState  
FLZip Code  
34239-5816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

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

Transaction ID : SA.559862.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

PETERS MARITAL, NICHOLAS, , MR.,

**B.** Mailing Address 2113 CLIMBING IVY DRIVECity  
TAMPAState  
FLZip Code  
33618-1710FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PROMETHEUS MANAGEMENT/SOUTHEASTOccupation  
CEO

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	2	5

Transaction ID : SA.568436.21.402

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

PFAUTCH, ROY, , MR.,

**C.** Mailing Address 52 PORTLAND PLCity  
SAINT LOUISState  
MOZip Code  
63108-1242FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CIVIC SERVICE INCOccupation  
EXECUTIVE CONSULTANT

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

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

Transaction ID : SA.560737.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

REAMEY, GARY, , ,

**A.**

Mailing Address 13915 OLD COAST ROAD, PH05

City  
NAPLESState  
FLZip Code  
34110-8715FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.563358.21.402

Amount of Each Receipt this Period

1500.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

SANTOS, EDWARD, ALEX, MR.,

**B.**

Mailing Address 518 PONCA TRAIL

City  
MAITLANDState  
FLZip Code  
32751-3953FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORTRESS INFORMATION SECURITYOccupation  
CEO AND CO-FOUNDER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	5

Transaction ID : SA.560398.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

SCHNEIDER, GREGG , , ,

**C.**

Mailing Address 288 PARKWAY

City  
GOLDEN BEACHState  
FLZip Code  
33160-2219FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

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

Transaction ID : SA.559864.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00
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# **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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SCHWARTZEL, CARLY, , ,

**A.**

Mailing Address 14195 REFLECTION LAKES DR

City

FORT MYERS

State

FL

Zip Code

33907-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKER

Occupation  
HOMEMAKER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2025

Transaction ID : SA.559509.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

SCHWARTZEL, JAMES, , ,

**B.**

Mailing Address 14195 REFLECTION LAKES DR

City

FT MYERS

State

FL

Zip Code

33907-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUN BROADCASTING

Occupation  
PRESIDENT

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 06 / 2025

Transaction ID : SA.559510.21.402

Amount of Each Receipt this Period

1700.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

TEAS, CHRISTOPHER, , ,

**C.**

Mailing Address 6 ST JOHNS LANE

City

NEW YORK

State

NY

Zip Code

10013-2115

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PARK SOUTH CAPITAL

Occupation  
MANAGING PARTNER

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 16 / 2025

Transaction ID : SA.560385.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

TEPAS, GARY, L., MR.,

**A.**

Mailing Address 1119 DORMIE DR

City  
NAPLESState  
FLZip Code  
34108-1928FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EMPLOYED INCOccupation  
CEO

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			12			2025			

Transaction ID : SA.569120.21.402

Amount of Each Receipt this Period

3100.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

ZENOZ, MARIA, E., MRS.,

**B.**

Mailing Address 17344 SOUTHWEST 88TH AVENUE

City  
MIAMIState  
FLZip Code  
33157-4535FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2030

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
01			10			2025			

Transaction ID : SA.559880.21.402

Amount of Each Receipt this Period

3300.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

Full Name (Last, First, Middle Initial)

TEAM RICK SCOTT

**C.**

Mailing Address P.O. BOX 76024

City  
WASHINGTONState  
DCZip Code  
20013-6024FEC ID number of contributing  
federal political committee.

C C00692343

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8165282.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
03			31			2025			

Transaction ID : SA12.569462

Amount of Each Receipt this Period

- 2359.89

☐ Memo Item

TRANSFER

TEAM RICK SCOTT JFC MEMO

- 2359.89

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

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

KADRE, MANUEL, , MR.,

**A.**

Mailing Address 5345 HAMMOCK DRIVE

City

CORAL GABLES

State

FL

Zip Code

33156-2103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBB AUTO GROUPOccupation  
EXECUTIVE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	4

Transaction ID : SA.416013.11.402

Amount of Each Receipt this Period

- 2800.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

TEAM RICK SCOTT

Mailing Address P.O. BOX 76024

City

WASHINGTON

State

DC

Zip Code

20013-6024

FEC ID number of contributing  
federal political committee.

C

C00692343

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8165282.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : SA12.569463

Amount of Each Receipt this Period

- 872.64

☐ Memo Item

TRANSFER

TEAM RICK SCOTT JFC MEMO

**C.**

Full Name (Last, First, Middle Initial)

BARAKAT, SAYEL, , ,

Mailing Address 422 LINKSIDE DR

City

MARINER BEACH

State

FL

Zip Code

32550-4505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

349.10

Date of Receipt

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

Transaction ID : SA.561001.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

- 872.64

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

**A.**

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

294.48

Date of Receipt

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

Transaction ID : SA.568055.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

BETMAN, RACHEL, , ,

Mailing Address 5 GALLO WAY

City

EDISON

State

NJ

Zip Code

08820-4200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

294.48

Date of Receipt

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

Transaction ID : SA.568056.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

HRUZA, VIRGINIA, , ,

Mailing Address 1 WALKING DIAMOND DR.

City

PRESCOTT

State

AZ

Zip Code

86301-6160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

246.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	2	4

Transaction ID : SA.568050.12.402

Amount of Each Receipt this Period

- 2.08

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

MUELLER, CHRISTINE, , MS.,

**A.** Mailing Address 1743 BOULDER DRIVECity  
DARIENState  
ILZip Code  
60561-5922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
10 23 2024

Transaction ID : SA.559511.12.402

Amount of Each Receipt this Period

- 20.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
MUELLER, CHRISTINE, , MS.,  
Mailing Address 1743 BOULDER DRIVECity  
DARIENState  
ILZip Code  
60561-5922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
11 06 2024

Transaction ID : SA.559512.12.402

Amount of Each Receipt this Period

- 1.75

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
MUELLER, CHRISTINE, , MS.,  
Mailing Address 1743 BOULDER DRIVECity  
DARIENState  
ILZip Code  
60561-5922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
10 16 2024

Transaction ID : SA.559513.12.402

Amount of Each Receipt this Period

- 0.05

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

**A.**

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

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

Transaction ID : SA.564291.12.402

Amount of Each Receipt this Period

- 30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

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

Transaction ID : SA.564301.12.402

Amount of Each Receipt this Period

- 20.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

Transaction ID : SA.564302.12.402

Amount of Each Receipt this Period

- 25.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

**A.**

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : SA.564303.12.402

Amount of Each Receipt this Period

- 25.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

NGUYEN, MINH, C., ,

Mailing Address 43 MAPLE ST

City

DOVER

State

NH

Zip Code

03820-3039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARCH

Occupation

MACHINIST

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

391.80

Date of Receipt

M M / D D / Y Y Y Y Y  
10 21 2024

Transaction ID : SA.564304.12.402

Amount of Each Receipt this Period

- 15.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y Y  
10 30 2024

Transaction ID : SA.561032.12.402

Amount of Each Receipt this Period

- 30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.**

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	2	4

Transaction ID : SA.561033.12.402

Amount of Each Receipt this Period

- 30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	2	4

Transaction ID : SA.561034.12.402

Amount of Each Receipt this Period

- 16.66

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	2	4

Transaction ID : SA.561035.12.402

Amount of Each Receipt this Period

- 25.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 195 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.** Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

Transaction ID : SA.564587.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	4

Transaction ID : SA.564588.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA.564589.12.402

Amount of Each Receipt this Period

- 25.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 196 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.** Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA.564590.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	2	4

Transaction ID : SA.564591.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	2	4

Transaction ID : SA.564592.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 197 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.**

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	4

Transaction ID : SA.564593.12.402

Amount of Each Receipt this Period

- 9.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	4

Transaction ID : SA.564594.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	2	4

Transaction ID : SA.564595.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 198 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.**

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 11 / 2024D D / Y Y Y Y Y  
11 / 2024Y Y Y Y Y  
2024

Transaction ID : SA.564596.12.402

Amount of Each Receipt this Period

- 30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 06 / 2024D D / Y Y Y Y Y  
06 / 2024Y Y Y Y Y  
2024

Transaction ID : SA.564597.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 06 / 2024D D / Y Y Y Y Y  
06 / 2024Y Y Y Y Y  
2024

Transaction ID : SA.564598.12.402

Amount of Each Receipt this Period

- 25.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.** Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	2	4

Transaction ID : SA.564599.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	2	4

Transaction ID : SA.564600.12.402

Amount of Each Receipt this Period

- 30.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**C.** Full Name (Last, First, Middle Initial)  
SPURGEON, SUSAN, P., ,  
Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

288.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	2	4

Transaction ID : SA.564601.12.402

Amount of Each Receipt this Period

- 10.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 200 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

SPURGEON, SUSAN, P., ,

**A.**

Mailing Address 416 STABLE VIEW CIR

City

CHATTANOOGA

State

TN

Zip Code

37405-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

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

Transaction ID : SA.564602.12.402

Amount of Each Receipt this Period

- 20.00

☒ Memo Item

TRANSFER

TRANSFER FROM TEAM RICK SCOTT

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

0.00

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

137912.77



	11a		11b		11c		11d	
	12		13a		13b	X	14	

RICK SCOTT FOR FLORIDA

# **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 202 OF 316

☐ 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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

ZECKMAN, JACKIE, , ,

**A.**

Mailing Address PO BOX 130708

City

TAMPA

State

FL

Zip Code

33681

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA14.1312

Amount of Each Receipt this Period

12500.00



Memo Item

REPAYMENT FOR PAYROLL EXPENSES SPLIT  
RICK SCOTT FOR FL

Full Name (Last, First, Middle Initial)

INSPERITY

**B.**

Mailing Address 8171 MAPLE LAWN BLVD

City

FULTON

State

MD

Zip Code

20759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA14.1308

Amount of Each Receipt this Period

10416.67



Memo Item

REPAYMENT FOR PAYROLL EXPENSES SPLIT  
RICK SCOTT FOR FL

Full Name (Last, First, Middle Initial)

LETS GET TO WORK PAC

**C.**

Mailing Address PO BOX 76024

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

C00692327

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

30225.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 23 2025

Transaction ID : SA14.1307

Amount of Each Receipt this Period

30225.15



Memo Item

REPAYMENT FOR PAYROLL EXPENSES SPLIT

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

30225.15

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

30225.15

# **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 203 OF 316

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

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

CHAIN BRIDGE BANK

**A.**

Mailing Address 1445 A LAUGHLIN AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1383.48

Date of Receipt

M M / D D / Y Y Y Y Y  
01 02 2025

02

2025

Transaction ID : SA15.1287

Amount of Each Receipt this Period

432.78



Memo Item

INTEREST EARNINGS

Full Name (Last, First, Middle Initial)

CHAIN BRIDGE BANK

**B.**

Mailing Address 1445 A LAUGHLIN AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1383.48

Date of Receipt

M M / D D / Y Y Y Y Y  
02 13 2025

13

2025

Transaction ID : SA15.1291

Amount of Each Receipt this Period

283.25



Memo Item

INTEREST EARNINGS

Full Name (Last, First, Middle Initial)

CHAIN BRIDGE BANK

**C.**

Mailing Address 1445 A LAUGHLIN AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1383.48

Date of Receipt

M M / D D / Y Y Y Y Y  
03 03 2025

03

2025

Transaction ID : SA15.1299

Amount of Each Receipt this Period

238.68



Memo Item

INTEREST EARNINGS

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

954.71

**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)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**SOUTHERN FIRST BANK**

**A.**

Mailing Address 4064 COLONY RD, SUITE 100

City

CHARLOTTE

State

NC

Zip Code

28211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA15.1296

Amount of Each Receipt this Period

65.47

☐ Memo Item

INTEREST EARNINGS

Full Name (Last, First, Middle Initial)

**SOUTHERN FIRST BANK**

**B.**

Mailing Address 4064 COLONY RD, SUITE 100

City

CHARLOTTE

State

NC

Zip Code

28211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2025

Transaction ID : SA15.1305

Amount of Each Receipt this Period

72.59

☐ Memo Item

INTEREST EARNINGS

Full Name (Last, First, Middle Initial)

**SOUTHERN FIRST BANK**

**C.**

Mailing Address 4064 COLONY RD, SUITE 100

City

CHARLOTTE

State

NC

Zip Code

28211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 31 / 2025

Transaction ID : SA15.1306

Amount of Each Receipt this Period

72.37

☐ Memo Item

INTEREST EARNINGS

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

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

210.43

1165.14

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

PAGE 205 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. SCOTT, RICK, , SENATOR,**

Mailing Address P.O. BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
IN-KIND: FACILITY RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

3300.00

Transaction ID : SB17.I1310

☐ Memo Item 218 MD LLC 340 9TH NAPLES FL 34102

Full Name (Last, First, Middle Initial)

**B. SCOTT, RICK, , SENATOR,**

Mailing Address P.O. BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
IN-KIND: AIR -COLUMBIA COLLIER MGT 340 9TH NAPLES FL 34102

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

22691.67

Transaction ID : SB17.I1312

☐ Memo Item AIR CHARTER 2-7 THRU 3-28

Full Name (Last, First, Middle Initial)

**C. ALBERGO, JOSEPH, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

568.17

Transaction ID : SB17.112

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

26559.84

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 206 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ARIAS, JUAN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
LOGISTICS CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.113

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARIAS, JUAN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
LOGISTICS CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.114

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARIAS, JUAN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
LOGISTICS CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.115

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

1500.00

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

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

PAGE 207 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ARIAS, JUAN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

67.26

Transaction ID : SB17.116

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HYATT CAPITAL**

Mailing Address 1001 16TH ST

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

67.26

Transaction ID : SB17.1021

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BARROLL, ROBERT, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.207

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

5567.26

**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)

PAGE 208 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BOUCHARD, ELISE, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOUCHARD, ELISE, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CARBONE, CRAIG, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.57

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

1500.00

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



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

PAGE 209 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CARBONE, CRAIG, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DALTON, ELLI, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

520.89

Transaction ID : SB17.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DALTON, ELLI, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2083.55

Transaction ID : SB17.69

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

3104.44

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

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

PAGE 210 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. DALTON, ELLI, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

260.00

Transaction ID : SB17.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

260.00

Transaction ID : SB17.1022

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVILA, MARY, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

852.27

Transaction ID : SB17.122

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

1112.27

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. GAMBINI, CAMBERON, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1045.44

Transaction ID : SB17.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LUKE, BENJAMIN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LUKE, BENJAMIN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.29

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

2045.44

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

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

PAGE 212 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. LUKE, BENJAMIN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1022.73

Transaction ID : SB17.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LUKE, BENJAMIN, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MANDRUP-POULSEN, AMANDA, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

520.87

Transaction ID : SB17.3

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

2043.60

**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)

PAGE 213 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. MANDRUP-POULSEN, AMANDA, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3125.00

Transaction ID : SB17.4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PURPURA, SALVATORE, , ,**

Mailing Address 478 STIRLING BRIDGE DR

City  
ORMOND BEACHState  
FLZip Code  
32174Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2325.00

Transaction ID : SB17.208

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PURPURA, SALVATORE, , ,**

Mailing Address 478 STIRLING BRIDGE DR

City  
ORMOND BEACHState  
FLZip Code  
32174Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3150.00

Transaction ID : SB17.209

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

8600.00

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

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

PAGE 214 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. PURPURA, SALVATORE, , ,**

Mailing Address 478 STIRLING BRIDGE DR

City  
ORMOND BEACHState  
FLZip Code  
32174Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1425.00

Transaction ID : SB17.210

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHWIRIAN, SARAH, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10416.67

Transaction ID : SB17.211

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHWIRIAN, SARAH, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10416.67

Transaction ID : SB17.212

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

22258.34

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. WRIGHT, MADELINE, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.121

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ZECKMAN, JACKIE, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12500.00

Transaction ID : SB17.110

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ZECKMAN, JACKIE, , ,**

Mailing Address PO BOX 130708

City  
TAMPAState  
FLZip Code  
33681Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12500.00

Transaction ID : SB17.111

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

25750.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ACTIVE ENGAGEMENT**

Mailing Address 113 E MARKET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
STEELSBURGState  
VAZip Code  
20176

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.18

Transaction ID : SB17.1

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. ADET**

Mailing Address 535 Central Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2025

City  
ST PETERSBURGState  
FLZip Code  
33701

FEC Identification Number

C

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.2

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2025

City  
NEW ORLEANSState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.70

Transaction ID : SB17.10

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

10019.88

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.20

Transaction ID : SB17.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3.70

Transaction ID : SB17.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.40

Transaction ID : SB17.13

☐ Memo Item

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

23.30

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)

PAGE 218 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.20

Transaction ID : SB17.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

- 95.00

Transaction ID : SB17.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

322.40

Transaction ID : SB17.5

☐ Memo Item

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

228.60

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

183.40

Transaction ID : SB17.6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : SB17.7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.8

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

188.90

**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)

PAGE 220 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2025

City  
NEW ORLEANSState  
LAZip Code  
70112

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

878.05

Transaction ID : SB17.9

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. APEX VENDOR**

Mailing Address PO BOX 17302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2025

City  
ARLINGTONState  
VAZip Code  
22216

FEC Identification Number

**C**Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2379.78

Transaction ID : SB17.16

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. APEX VENDOR**

Mailing Address PO BOX 17302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2025

City  
ARLINGTONState  
VAZip Code  
22216

FEC Identification Number

**C**Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.70

Transaction ID : SB17.17

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

3259.53

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

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

PAGE 221 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. APEX VENDOR**

Mailing Address PO BOX 17302

City  
ARLINGTONState  
VAZip Code  
22216Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

90.30

Transaction ID : SB17.18

☐ Memo Item**B. APEX VENDOR**

Mailing Address PO BOX 17302

City  
ARLINGTONState  
VAZip Code  
22216Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.85

Transaction ID : SB17.19

☐ Memo Item**C. APEX VENDOR**

Mailing Address PO BOX 17302

City  
ARLINGTONState  
VAZip Code  
22216Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

323.35

Transaction ID : SB17.20

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

414.50

**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)

PAGE 222 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. APEX VENDOR**

Mailing Address PO BOX 17302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City  
ARLINGTONState  
VAZip Code  
22216

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

323.35

Transaction ID : SB17.21

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. BELIEVE MEDIA LLC**

Mailing Address 41898 BENINGBROUGH PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2025

City  
LEESBURGState  
VAZip Code  
20176

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

48.79

Transaction ID : SB17.22

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. BELIEVE MEDIA LLC**

Mailing Address 41898 BENINGBROUGH PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2025

City  
LEESBURGState  
VAZip Code  
20176

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.25

Transaction ID : SB17.23

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

382.39

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BELIEVE MEDIA LLC**

Mailing Address 41898 BENINGBROUGH PL

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.00

Transaction ID : SB17.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BELIEVE MEDIA LLC**

Mailing Address 41898 BENINGBROUGH PL

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

481.36

Transaction ID : SB17.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BELIEVE MEDIA LLC**

Mailing Address 41898 BENINGBROUGH PL

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.76

Transaction ID : SB17.26

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

560.12

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BELIEVE MEDIA LLC**

Mailing Address 41898 BENINGBROUGH PL

City  
LEESBURGState  
VAZip Code  
20176Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.00

Transaction ID : SB17.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

652.22

Transaction ID : SB17.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1178.34

Transaction ID : SB17.33

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

1854.56

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2025

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

394.96

Transaction ID : SB17.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2025

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2424.31

Transaction ID : SB17.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2025

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

4490.53

Transaction ID : SB17.36

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

7309.80

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

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

PAGE 226 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3323.22

Transaction ID : SB17.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

213.76

Transaction ID : SB17.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4427.34

Transaction ID : SB17.39

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

7964.32

**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)

PAGE 227 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4856.90

Transaction ID : SB17.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

431.02

Transaction ID : SB17.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3497.65

Transaction ID : SB17.42

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

8785.57

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

775.60

Transaction ID : SB17.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BETTER MOUSETRAP DIGITAL**

Mailing Address 350 17TH ST

City  
COURTENAYState  
BCZip Code  
99999Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

340.55

Transaction ID : SB17.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CH STRATEGIES LLC**

Mailing Address 607 ELLIOTT ST NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.46

☐ Memo Item

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

4116.15

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CH STRATEGIES LLC**

Mailing Address 607 ELLIOTT ST NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445 LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445 LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.49

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

3050.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445 LAUGHLIN AVE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1595 SPRING HILL RD

City  
TYSONS CORNERState  
VAZip Code  
22182Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1595 SPRING HILL RD

City  
TYSONS CORNERState  
VAZip Code  
22182Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.52

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

1825.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1595 SPRING HILL RD

City  
TYSONS CORNERState  
VAZip Code  
22182Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.53

☐ Memo Item**B. CONSERVATIVE CONNECTOR**

Mailing Address 190 MONROE AVE

City  
GRAND RAPIDSState  
MIZip Code  
49503Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.65

Transaction ID : SB17.54

☐ Memo Item**C. CONSERVATIVE CONNECTOR**

Mailing Address 190 MONROE AVE

City  
GRAND RAPIDSState  
MIZip Code  
49503Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.65

Transaction ID : SB17.55

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

949.30

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CONSERVATIVE CONNECTOR**

Mailing Address 190 MONROE AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
GRAND RAPIDSState  
MIZip Code  
49503

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.65

Transaction ID : SB17.56

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE**

Mailing Address 237 FLORIDA AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2025

City  
WASHINGTONState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.30

Transaction ID : SB17.59

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL PROCESSORS INC**

Mailing Address 1150 CONRAD CT

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2025

City  
HAGERSTOWNState  
MDZip Code  
21740

FEC Identification Number

C

Purpose of Disbursement  
BATCHING AND CAGING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

73.21

Transaction ID : SB17.60

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

128.16

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. DONOR BUREAU**

Mailing Address 1900 RESTON METRO PLAZA

City  
RESTONState  
VAZip Code  
20190Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2025

FEC Identification Number

**C**

Amount of Each Disbursement this Period

78.47

Transaction ID : SB17.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONOR BUREAU**

Mailing Address 1900 RESTON METRO PLAZA

City  
RESTONState  
VAZip Code  
20190Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

FEC Identification Number

**C**

Amount of Each Disbursement this Period

0.80

Transaction ID : SB17.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DRUCKER LAWHON**

Mailing Address 530 10TH ST NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FINANCE CONSULTING/DELIVERY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2025

FEC Identification Number

**C**

Amount of Each Disbursement this Period

3628.34

Transaction ID : SB17.63

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

3707.61

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. DRUCKER LAWHON**

Mailing Address 530 10TH ST NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FINANCE CONSULTING/DELIVERY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4059.56

Transaction ID : SB17.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DRUCKER LAWHON**

Mailing Address 530 10TH ST NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FINANCE CONSULTING/DELIVERY

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7446.79

Transaction ID : SB17.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EXPEARA LLC**

Mailing Address 414 MEADE DR SW

City  
LEESBURGState  
VAZip Code  
20175Purpose of Disbursement  
COMPUTER SVC

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB17.71

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

14206.35

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. EXPEARA LLC**

Mailing Address 414 MEADE DR SW

City  
LEESBURGState  
VAZip Code  
20175Purpose of Disbursement  
COMPUTER SVC

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2025.00

Transaction ID : SB17.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EXPEARA LLC**

Mailing Address 414 MEADE DR SW

City  
LEESBURGState  
VAZip Code  
20175Purpose of Disbursement  
COMPUTER SVC

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2025.00

Transaction ID : SB17.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address PO BOX 2818

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

248.61

Transaction ID : SB17.74

☐ Memo Item

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

4298.61

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)

PAGE 236 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ADOBE**

Mailing Address 151 S ALMADEN BLVD

Date of Disbursement

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

City  
SAN JOSEState  
CAZip Code  
95110

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

59.99

Transaction ID : SB17.1001

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMOCO**

Mailing Address 1312 E BUSCH BLVD

Date of Disbursement

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

City  
TAMPAState  
FLZip Code  
33612

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.62

Transaction ID : SB17.1003

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. ENVATO**

Mailing Address S STATE ST STE 1200

Date of Disbursement

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

City  
SALT LAKE CITYState  
UTZip Code  
84111

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

39.00

Transaction ID : SB17.1002

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

0.00

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

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

PAGE 237 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. SHUTTERSTOCK**

Mailing Address 350 5TH AVE 21ST FLOOR

City  
NEW YORKState  
NYZip Code  
10118Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.1000

☒ Memo Item**B. FIRST BANKCARD**

Mailing Address PO BOX 2818

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

881.01

Transaction ID : SB17.75

☐ Memo Item**C. ADOBE**

Mailing Address 151 S ALMADEN BLVD

City  
SAN JOSEState  
CAZip Code  
95110Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

32.01

Transaction ID : SB17.1006

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

881.01

**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)

PAGE 238 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CAMPAIGNMONITOR**

Mailing Address 8900 KEYSTONE CROSSING #1225

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
SAN FRANCISCOState  
CAZip Code  
94016Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

249.00

Transaction ID : SB17.1005

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. GRABIEN**

Mailing Address 1820 AVE M #1163

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
BROOKLYNState  
NYZip Code  
11230Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.1004

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address PO BOX 2818

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

148.77

Transaction ID : SB17.76

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

148.77

**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)

PAGE 239 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
FT WORTHState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

99.02

Transaction ID : SB17.1007

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. PUBLIX**

Mailing Address 2724 W HILLSBOROUGH AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
TAMPAState  
FLZip Code  
33614

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.20

Transaction ID : SB17.1009

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 401 N ASHLEY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
TAMPAState  
FLZip Code  
33602

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.55

Transaction ID : SB17.1008

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

0.00

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

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

PAGE 240 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address PO BOX 2818

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4038.16

Transaction ID : SB17.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

236.20

Transaction ID : SB17.1010

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL SUPER MARKET**

Mailing Address 241 MASS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

215.34

Transaction ID : SB17.1011

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

4038.16

**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)

PAGE 241 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CHIPOTLE**

Mailing Address 2011 DALE MABRY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
TAMPAState  
FLZip Code  
33607

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

302.39

Transaction ID : SB17.1012

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. DC PATH TRANSPORTATION**

Mailing Address 1250 CONNECTICUT AVE NW SUITE 700

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
WASHINGTONState  
DCZip Code  
20036

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2280.00

Transaction ID : SB17.1013

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. JUNCTION BAKERY BISTRO**

Mailing Address 115 KING ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

214.14

Transaction ID : SB17.1018

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

0.00

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

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

PAGE 242 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ROTI**

Mailing Address 1311 F ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
WASHINGTONState  
DCZip Code  
20004

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

326.20

Transaction ID : SB17.1017

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. SENATE DINING ROOM**

Mailing Address 50 CONSTITUTION AVE NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
WASHINGTONState  
DCZip Code  
20002

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

133.00

Transaction ID : SB17.1015

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. SWEETGREEN**

Mailing Address 624 E ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2025

City  
WASHINGTONState  
DCZip Code  
20004

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

55.60

Transaction ID : SB17.1014

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

0.00

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

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

PAGE 243 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. SWEETGREEN**

Mailing Address 624 E ST NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

80.16

Transaction ID : SB17.1016

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

135.13

Transaction ID : SB17.1019

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. YOUNG CHOW**

Mailing Address 312 PENNSYLVANIA AVE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.1020

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

0.00

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

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

PAGE 244 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address PO BOX 2818

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

246.76

Transaction ID : SB17.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHIPOTLE**

Mailing Address 2011 DALE MABRY

City  
TAMPAState  
FLZip Code  
33607Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

106.48

Transaction ID : SB17.1032

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TWITTER**

Mailing Address 1355 MARKET ST SUITE 900

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

140.28

Transaction ID : SB17.1033

☒ Memo Item

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

246.76

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)

PAGE 245 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address PO BOX 2818

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1396.61

Transaction ID : SB17.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ADOBE**

Mailing Address 151 S ALMADEN BLVD

City  
SAN JOSEState  
CAZip Code  
95110Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.99

Transaction ID : SB17.1024

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ADOBE**

Mailing Address 151 S ALMADEN BLVD

City  
SAN JOSEState  
CAZip Code  
95110Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.01

Transaction ID : SB17.1028

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

1396.61

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. CAMPAIGNMONITOR**

Mailing Address 8900 KEYSTONE CROSSING #1225

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2025

City  
SAN FRANCISCOState  
CAZip Code  
94016Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

249.00

Transaction ID : SB17.1031

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHEVRON**

Mailing Address 4650 W KENNEDY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2025

City  
TAMPAState  
FLZip Code  
33609Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

48.77

Transaction ID : SB17.1026

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ENVATO**

Mailing Address S STATE ST STE 1200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2025

City  
SALT LAKE CITYState  
UTZip Code  
84111Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

39.00

Transaction ID : SB17.1025

☒ Memo Item

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. GRABIEN**

Mailing Address 1820 AVE M #1163

City  
BROOKLYNState  
NYZip Code  
11230Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.1030

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHUTTERSTOCK**

Mailing Address 350 5TH AVE 21ST FLOOR

City  
NEW YORKState  
NYZip Code  
10118Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.1023

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. TOPS PRODUCTS**

Mailing Address 184 SHUMAN BLVD STE 130

City  
NAPERVILLEState  
ILZip Code  
60563Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

38.74

Transaction ID : SB17.1029

☒ Memo Item

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. US SENATE CAFE**

Mailing Address 50 CONSTITUTION AVE NE

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

230.10

Transaction ID : SB17.1027

☒ Memo Item**B. FIRST BANKCARD**

Mailing Address PO BOX 2818

City  
OMAHAState  
NEZip Code  
68103Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2080.13

Transaction ID : SB17.80

☐ Memo Item**C. AMBAR RESTAURANT**

Mailing Address 523 8TH ST

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.90

Transaction ID : SB17.1034

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

2080.13

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



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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. BREAKERS HOTEL**

Mailing Address 1 S COUNTY RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2025

City  
PALM BEACHState  
FLZip Code  
33480

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

645.00

Transaction ID : SB17.1037

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. CHIPOTLE**

Mailing Address 2011 DALE MABRY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2025

City  
TAMPAState  
FLZip Code  
33607

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

302.39

Transaction ID : SB17.1035

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. INSTACART**

Mailing Address 50 BEALE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2025

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

160.86

Transaction ID : SB17.1036

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ROTI**

Mailing Address 1311 F ST NW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20004

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

641.10

Transaction ID : SB17.1038

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

129.88

Transaction ID : SB17.1039

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address PO BOX 2818

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

City  
OMAHAState  
NEZip Code  
68103

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1046.01

Transaction ID : SB17.81

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

1046.01

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ADOBE**

Mailing Address 151 S ALMADEN BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2025

City  
SAN JOSEState  
CAZip Code  
95110

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

32.01

Transaction ID : SB17.1042

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGNMONITOR**

Mailing Address 8900 KEYSTONE CROSSING #1225

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2025

City  
SAN FRANCISCOState  
CAZip Code  
94016

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

249.00

Transaction ID : SB17.1041

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. GRABIEN**

Mailing Address 1820 AVE M #1163

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2025

City  
BROOKLYNState  
NYZip Code  
11230

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.1040

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. US SENATE CAFE**

Mailing Address 50 CONSTITUTION AVE NE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20002

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

165.00

Transaction ID : SB17.1043

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

City  
ELGINState  
ILZip Code  
60123

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

137.54

Transaction ID : SB17.82

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

Date of Disbursement

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

City  
ELGINState  
ILZip Code  
60123

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.50

Transaction ID : SB17.83

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

146.04

**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)

PAGE 253 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6403.99

Transaction ID : SB17.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8.50

Transaction ID : SB17.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2336.72

Transaction ID : SB17.86

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

8749.21

**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)

PAGE 254 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

38.25

Transaction ID : SB17.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

83.50

Transaction ID : SB17.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.65

Transaction ID : SB17.89

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

170.40

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1849.94

Transaction ID : SB17.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

132.15

Transaction ID : SB17.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

29.95

Transaction ID : SB17.92

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

2012.04

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. FRONTLINE STRATEGIES**

Mailing Address 1501 COMMERCE DR

City  
ELGINState  
ILZip Code  
60123Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

36.75

Transaction ID : SB17.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOLDMAN SACHS**

Mailing Address 101 CONSTITUTION AVE

City  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOODSPEED GROUP**

Mailing Address 1200 S ARLINGTON RIDGE RD

City  
ARLINGTONState  
VAZip Code  
22202Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6000.00

Transaction ID : SB17.95

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

6135.75

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. GOODSPEED GROUP**

Mailing Address 5293 BALLYCASTLE CIR

City  
ALEXANDRIAState  
VAZip Code  
22315Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOODSPEED GROUP**

Mailing Address 5293 BALLYCASTLE CIR

City  
ALEXANDRIAState  
VAZip Code  
22315Purpose of Disbursement  
FINANCE CONSULTING/TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6209.99

Transaction ID : SB17.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

81.15

Transaction ID : SB17.100

☐ Memo Item

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

8791.14

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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.50

Transaction ID : SB17.101

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

51.00

Transaction ID : SB17.102

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.25

Transaction ID : SB17.103

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

97.75

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.50

Transaction ID : SB17.104

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

51.00

Transaction ID : SB17.105

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.25

Transaction ID : SB17.106

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

97.75

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

327.25

Transaction ID : SB17.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HICKORY DATA MANAGEMENT**

Mailing Address 121 N WASHINGTON ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

68.40

Transaction ID : SB17.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Mailing Address 15405 JOHN MARSHALL HWY

City  
HAYMARKETState  
VAZip Code  
20169Purpose of Disbursement  
LEGAL CONSLTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.107

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

10395.65

**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)

PAGE 261 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. INSPERITY**

Mailing Address 8171 MAPLE LAWN BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2025

City  
FULTONState  
MDZip Code  
20759

FEC Identification Number

**C**Purpose of Disbursement  
PARYOLL-SVC-INSUR-TAXES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3380.45

Transaction ID : SB17.108

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. INSPERITY**

Mailing Address 8171 MAPLE LAWN BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2025

City  
FULTONState  
MDZip Code  
20759

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL SVC-INSUR-TAXES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

6637.37

Transaction ID : SB17.109

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. KEISER UNIVERSITY**

Mailing Address 1900 W COMMERCIAL BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2025

City  
FORT LAUDERDALEState  
FLZip Code  
33309

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

727.87

Transaction ID : SB17.117

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

10745.69

**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)

PAGE 262 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. KEISER UNIVERSITY**

Mailing Address 1900 W COMMERCIAL BLVD

City  
FORT LAUDERDALEState  
FLZip Code  
33309Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1331.47

Transaction ID : SB17.118

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lex Politica PLLC**

Mailing Address PO Box 341016

City  
AustinState  
TXZip Code  
78734Purpose of Disbursement  
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.119

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LISTWISE**

Mailing Address 8725 S MADISON ST

City  
BURR RIDGEState  
ILZip Code  
60527Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

164.12

Transaction ID : SB17.120

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

6495.59

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

115.50

Transaction ID : SB17.123

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2025

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.35

Transaction ID : SB17.124

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2025

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

17.50

Transaction ID : SB17.125

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

133.35

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

757.98

Transaction ID : SB17.126

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

105.70

Transaction ID : SB17.127

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

157.90

Transaction ID : SB17.128

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

1021.58

**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)

PAGE 265 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.32

Transaction ID : SB17.129

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

271.38

Transaction ID : SB17.130

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

City  
UNIONState  
KYZip Code  
41091Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

84.00

Transaction ID : SB17.131

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

396.70

**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)

PAGE 266 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
UNIONState  
KYZip Code  
41091

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.58

Transaction ID : SB17.132

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

City  
UNIONState  
KYZip Code  
41091

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

47.25

Transaction ID : SB17.133

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. MAWCO LLC**

Mailing Address 918 WHIRLAWAY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
UNIONState  
KYZip Code  
41091

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

172.20

Transaction ID : SB17.134

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

294.03

**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)

PAGE 267 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

City  
DALLASState  
TXZip Code  
75208Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

37.43

Transaction ID : SB17.135

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

City  
DALLASState  
TXZip Code  
75208Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.73

Transaction ID : SB17.136

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

City  
DALLASState  
TXZip Code  
75208Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

440.80

Transaction ID : SB17.137

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

479.96

**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)

PAGE 268 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.81

Transaction ID : SB17.138

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

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

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.32

Transaction ID : SB17.139

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

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

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

47.67

Transaction ID : SB17.140

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

141.80

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

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

PAGE 269 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.71

Transaction ID : SB17.141

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

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

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.19

Transaction ID : SB17.142

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

28.31

Transaction ID : SB17.143

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

40.21

**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)

PAGE 270 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

47.67

Transaction ID : SB17.144

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.71

Transaction ID : SB17.145

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. O2M DIGITAL**

Mailing Address 539 W COMMERCE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
DALLASState  
TXZip Code  
75208

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.75

Transaction ID : SB17.146

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

79.13

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

63.25

Transaction ID : SB17.147

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

21.25

Transaction ID : SB17.148

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

164.40

Transaction ID : SB17.149

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

248.90

**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)

PAGE 272 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1994.85

Transaction ID : SB17.150

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

42.50

Transaction ID : SB17.151

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

72.25

Transaction ID : SB17.152

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

2109.60

**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)

PAGE 273 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.85

Transaction ID : SB17.153

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

110.85

Transaction ID : SB17.154

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

58.40

Transaction ID : SB17.155

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

170.10

**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)

PAGE 274 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

265.37

Transaction ID : SB17.156

☐ Memo Item**B. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.157

☐ Memo Item**C. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

127.65

Transaction ID : SB17.158

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

409.02

**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)

PAGE 275 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. OLYMPIC MEDIA LLC**

Mailing Address 1881 N NASH ST

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.90

Transaction ID : SB17.159

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
DIGITAL FUNDRAISING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4297.80

Transaction ID : SB17.160

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
DIGITAL FUNDRAISING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3744.75

Transaction ID : SB17.161

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

8092.45

**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)

PAGE 276 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
DIGITAL FUNDRAISING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

203.49

Transaction ID : SB17.162

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
DIGITAL FUNDRAISING

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3877.66

Transaction ID : SB17.163

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

283.64

Transaction ID : SB17.164

☐ Memo Item

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

4364.79

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)

PAGE 277 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

363.94

Transaction ID : SB17.165

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

221.41

Transaction ID : SB17.166

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1273.46

Transaction ID : SB17.167

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

1858.81

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 278 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

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

City  
ANNAPOLISState  
MDZip Code  
21401

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

843.26

Transaction ID : SB17.168

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

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

City  
ANNAPOLISState  
MDZip Code  
21401

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

820.72

Transaction ID : SB17.169

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

City  
ANNAPOLISState  
MDZip Code  
21401

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

185.52

Transaction ID : SB17.170

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1849.50

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

911.56

Transaction ID : SB17.171

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1223.97

Transaction ID : SB17.172

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

657.87

Transaction ID : SB17.173

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

2793.40

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

136.88

Transaction ID : SB17.174

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ONMESSAGE DIGITAL FUNDRAISING LLC**

Mailing Address 716 GIDDINGS AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

265.76

Transaction ID : SB17.175

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. P2P MESSAGING**

Mailing Address 2800 S SHIRLINGTON

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

370.28

Transaction ID : SB17.176

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

772.92

**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)

PAGE 281 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. P2P MESSAGING**

Mailing Address 2800 S SHIRLINGTON

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

285.70

Transaction ID : SB17.177

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. P2P MESSAGING**

Mailing Address 2800 S SHIRLINGTON

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

32.68

Transaction ID : SB17.178

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. P2P MESSAGING**

Mailing Address 2800 S SHIRLINGTON

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City  
ARLINGTONState  
VAZip Code  
22206Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

58.15

Transaction ID : SB17.179

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

376.53

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

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

PAGE 282 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. PAUL ARNOLD**

Mailing Address PO BOX 130708

Date of Disbursement

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

City  
TAMPAState  
FLZip Code  
33681

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

511.35

Transaction ID : SB17.180

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. POPACTA**

Mailing Address 10 FAIRWAY DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	2	5

City  
DEERFIELD BEACHState  
FLZip Code  
33441

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

39.12

Transaction ID : SB17.181

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. RED FOG**

Mailing Address 1209 ORANGE ST

Date of Disbursement

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

City  
WILMINGTONState  
DEZip Code  
19801

FEC Identification Number

C

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.70

Transaction ID : SB17.182

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

551.17

**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)

PAGE 283 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. RED FOG**

Mailing Address 1209 ORANGE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2025

City  
WILMINGTONState  
DEZip Code  
19801Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.70

Transaction ID : SB17.183

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RED FOG**

Mailing Address 1209 ORANGE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
WILMINGTONState  
DEZip Code  
19801Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.70

Transaction ID : SB17.184

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RED RIGHT LISTS LLC**

Mailing Address 108 W 13TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City  
WILMINGTONState  
DEZip Code  
19801Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.185

☐ Memo Item

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

21.40

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. RED RIGHT LISTS LLC**

Mailing Address 108 W 13TH ST

City  
WILMINGTONState  
DEZip Code  
19801Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.186

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RED RIGHT LISTS LLC**

Mailing Address 108 W 13TH ST

City  
WILMINGTONState  
DEZip Code  
19801Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.187

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT COUNTRY LISTS**

Mailing Address 115 N ST ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

28.36

Transaction ID : SB17.188

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

68.36

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. RIGHT COUNTRY LISTS**

Mailing Address 115 N ST ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : SB17.189

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIGHT COUNTRY LISTS**

Mailing Address 115 N ST ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : SB17.190

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT COUNTRY LISTS**

Mailing Address 115 N ST ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.36

Transaction ID : SB17.191

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

42.36

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. RIGHT COUNTRY LISTS**

Mailing Address 115 N ST ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : SB17.192

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIGHT COUNTRY LISTS**

Mailing Address 115 N ST ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.36

Transaction ID : SB17.193

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

222.27

Transaction ID : SB17.194

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

257.63

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

318.89

Transaction ID : SB17.195

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

809.02

Transaction ID : SB17.196

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2459.14

Transaction ID : SB17.197

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

3587.05

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

723.62

Transaction ID : SB17.198

☐ Memo Item**B. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1498.05

Transaction ID : SB17.199

☐ Memo Item**C. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	7	/	2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

283.12

Transaction ID : SB17.200

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

2504.79

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

293.12

Transaction ID : SB17.201

☐ Memo Item**B. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

965.92

Transaction ID : SB17.202

☐ Memo Item**C. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

528.48

Transaction ID : SB17.203

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

1787.52

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

350.88

Transaction ID : SB17.204

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

388.37

Transaction ID : SB17.205

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHT RAIL CO**

Mailing Address 705 MELVIN AVE

City  
ANNAPOLISState  
MDZip Code  
21401Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

374.87

Transaction ID : SB17.206

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

1114.12

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. SHIRAZ MEDIA**

Mailing Address 25 LITTLE BEND

City  
BARRINGTONState  
ILZip Code  
60010Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.75

Transaction ID : SB17.213

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHIRAZ MEDIA**

Mailing Address 25 LITTLE BEND

City  
BARRINGTONState  
ILZip Code  
60010Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

21.75

Transaction ID : SB17.214

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHIRAZ MEDIA**

Mailing Address 25 LITTLE BEND

City  
BARRINGTONState  
ILZip Code  
60010Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.75

Transaction ID : SB17.215

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

65.25

**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)

PAGE 292 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. THREE ARBOR INSURANCE**

Mailing Address 421 OFFICE PARK DR

City  
BIRMINGHAMState  
ALZip Code  
35223Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33831.28

Transaction ID : SB17.216

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TMA DIRECT INC**

Mailing Address 1900 RESTON METRO PLAZA

City  
RESTONState  
VAZip Code  
20190Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

60.99

Transaction ID : SB17.217

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TMA DIRECT INC**

Mailing Address 1900 RESTON METRO PLAZA

City  
RESTONState  
VAZip Code  
20190Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

165.70

Transaction ID : SB17.218

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

34057.97

**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)

PAGE 293 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. TMA DIRECT INC**

Mailing Address 1900 RESTON METRO PLAZA

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	03	/	2025

City  
RESTONState  
VAZip Code  
20190

FEC Identification Number

**C**Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

95.77

Transaction ID : SB17.219

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. TMA DIRECT INC**

Mailing Address 1900 RESTON METRO PLAZA

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	31	/	2025

City  
RESTONState  
VAZip Code  
20190

FEC Identification Number

**C**Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.03

Transaction ID : SB17.220

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. WELLS FARGO**

Mailing Address 420 MONTGOMERY ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01	/	13	/	2025

City  
SAN FRANCISCOState  
CAZip Code  
94104

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

74.43

Transaction ID : SB17.221

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2030

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

194.23

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. WELLS FARGO**

Mailing Address 420 MONTGOMERY ST

City  
SAN FRANCISCOState  
CAZip Code  
94104Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

74.45

Transaction ID : SB17.222

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

86.04

Transaction ID : SB17.223

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

69.45

Transaction ID : SB17.224

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

229.94

**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)

PAGE 295 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

219.32

Transaction ID : SB17.225

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

906.55

Transaction ID : SB17.226

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

344.67

Transaction ID : SB17.227

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1470.54

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

491.36

Transaction ID : SB17.228

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

13.58

Transaction ID : SB17.229

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

647.89

Transaction ID : SB17.230

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1152.83

**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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

515.53

Transaction ID : SB17.231

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

121.70

Transaction ID : SB17.232

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

306.32

Transaction ID : SB17.233

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2030

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

943.55

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 298 OF 316

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**RICK SCOTT FOR FLORIDA**

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

154.23

Transaction ID : SB17.234

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

68.95

Transaction ID : SB17.235

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

223.18

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

310892.97

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)

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

PAGE 299 OF 316

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NAME OF COMMITTEE (In Full)

RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)

A. ZENOZ, MARIA, , ,

Mailing Address 7344 SW 88TH AVE

City  
MIAMI

State  
FL

Zip Code  
33157

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2030

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 10 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB20A.1

☐ 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:

Category/  
Type

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:

Category/  
Type

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).....▶

10000.00

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

10000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 300 OF 316

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.804

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN  
☐ General  
☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 10 2022

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

N/A

0.00 % (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).....▶

1000000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 301 OF 316

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.864

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

3000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
11 / 07 / 2022M M / D D / Y Y Y Y  
/ / N/AM M / D D / Y Y Y Y  
/ / N/AM M / D D / Y Y Y Y  
/ / N/A

0.00

% (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).....▶

3000000.00

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

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

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

PAGE 302 OF 316

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.864\_C\_B\_B

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN  
☐ General  
☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

1400000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1400000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 18 / 2023M M / D D / Y Y Y Y  
N/AM M / D D / Y Y Y Y  
N/AM M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

1400000.00

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

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

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

PAGE 303 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.864\_C\_B

RICK SCOTT FOR FLORIDA

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

700000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

700000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
11 / 03 / 2023

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

700000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 304 OF 316

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.864\_C

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

531000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

531000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
11 10 / 2023M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

531000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 305 OF 316

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.864\_B

RICK SCOTT FOR FLORIDA

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

209156.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

209156.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
11 16 / 2023

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

209156.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 306 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.864\_B\_B

RICK SCOTT FOR FLORIDA

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

147567.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

147567.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
11 / 21 / 2023

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

147567.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 307 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1061

RICK SCOTT FOR FLORIDA

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

924000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

924000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
04 04 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

N/A

0.00 % (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).....▶

924000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 308 OF 316

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1099

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

934111.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

934111.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
04 15 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

N/A

0.00

% (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).....▶

934111.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 309 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1100

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN  
☐ General  
☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

1418000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1418000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
04 / 29 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

1418000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 310 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1120

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

2300000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2300000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 13 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

2300000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 311 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1172

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

850000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

850000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
08 06 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y  
N/A

0.00 % (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).....▶

850000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 312 OF 316

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1176

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☒ Primary CANDIDATE LOAN☐ General☐ Other (specify) ▼

SCOTT, RICK, , SEN,

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

725000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

725000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
08 12 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

N/A

0.00 % (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).....▶

725000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1195

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2024

☐ Primary CANDIDATE LOAN☒ General☐ Other (specify) ▼

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

2500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 / 03 / 2024M M / D D / Y Y Y Y  
/ / N/AM M / D D / Y Y Y Y  
/ / N/AM M / D D / Y Y Y Y  
/ / N/A

0.00

% (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).....▶

2500000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 314 OF 316

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1215

RICK SCOTT FOR FLORIDA

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

SCOTT, RICK, , SENATOR,

Election: 2024

☐ Primary CANDIDATE LOAN☒ General☐ Other (specify) ▼

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

3000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 11 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

N/A

0.00 % (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).....▶

3000000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1219

RICK SCOTT FOR FLORIDA

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

SCOTT, RICK, , SENATOR,

Election: 2024

☐ Primary CANDIDATE LOAN☒ General☐ Other (specify) ▼

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

3000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 18 / 2024M M / D D / Y Y Y Y  
N/AM M / D D / Y Y Y Y  
N/AM M / D D / Y Y Y Y  
N/A

0.00

% (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).....▶

3000000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1238

RICK SCOTT FOR FLORIDA

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

SCOTT, RICK, , SENATOR,

Election: 2024

☐ Primary CANDIDATE LOADN☒ General☐ Other (specify) ▼

Mailing Address

P.O. BOX 130708

City

TAMPA

State

FL

ZIP Code

33681

☒ Personal Funds of the Candidate

Original Amount of Loan

1500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 / 28 / 2024M M / D D / Y Y Y Y  
/ / N/AM M / D D / Y Y Y Y  
/ / N/AM M / D D / Y Y Y Y  
/ / N/A

0.00 % (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).....▶

1500000.00

TOTALS This Period (last page in this line only).....▶

24138834.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.