

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Bill Posey

ADDRESS (number and street)

P. O. Box 411486

Check if different than previously reported. (ACC)

Melbourne

FL

32941

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00444968

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

FL

08

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

08 /

28 /

2018

in the State of

FL

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

/ /

/ /

/ /

in the State of

/ /

5. Covering Period

07 /

01 /

2018

through

08 /

08 /

2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Watkins, Nancy, H., ,

Type or Print Name of Treasurer

Signature of Treasurer

Watkins, Nancy, H., ,

[Electronically Filed]

Date

08 /

15 /

2018

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Friends of Bill Posey**

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

	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))....	50695.00	599583.20
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1780.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	50695.00	597803.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	40279.91	473463.65
(b) Total Offsets to Operating Expenditures (from Line 14).....	95.50	695.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40184.41	472768.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	637615.34	
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).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Friends of Bill Posey

Report Covering the Period: From: M M / D D / Y Y Y Y  
07 / 01 / 2018 To: M M / D D / Y Y Y Y  
08 / 08 / 2018

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).....	23350.00	290850.00
(ii) Unitemized .....	2345.00	46487.18
(iii) TOTAL of contributions from individuals .....	25695.00	337337.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	262246.02
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	50695.00	599583.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	95.50	695.30
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	100.98	825.45
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....		
	50891.48	601103.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40279.91	473463.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1780.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1780.00
21. OTHER DISBURSEMENTS .....	15000.00	67000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	55279.91	542243.65

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	642003.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50891.48
25. SUBTOTAL (add Line 23 and Line 24).....	692895.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55279.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	637615.34

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 47  
(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)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Baldwin, Donald, , ,**

Mailing Address 1320 16th Court, S.W.

City: Vero Beach State: FL Zip Code: 32962

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

Name of Employer: n/a Occupation: retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 21 / 2018

Transaction ID : **C-79-01tY06**

Amount of Each Receipt this Period: 50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Childs, John W., , ,**

Mailing Address 165 Sago Palm Road

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: J.W. Childs Associates, Inc. Occupation: chairman

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5400.00

Date of Receipt: 08 / 01 / 2018

Transaction ID : **C-251-01vo05**

Amount of Each Receipt this Period: 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Childs, John W., , ,**

Mailing Address 165 Sago Palm Road

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: J.W. Childs Associates, Inc. Occupation: chairman

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5400.00

Date of Receipt: 08 / 01 / 2018

Transaction ID : **C-252-01vo06**

Amount of Each Receipt this Period: 2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5450.00

**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: PAGE 6 OF 47  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Childs, Marlene I., , ,**

Mailing Address 165 Sago Palm Road

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: n/a Occupation: homemaker

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2018

Transaction ID : **C-253-01vp05**

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Childs, Marlene I., , ,**

Mailing Address 165 Sago Palm Road

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: n/a Occupation: homemaker

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2018

Transaction ID : **C-254-01vp06**

Amount of Each Receipt this Period  
2300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Corrigan, J. Pat, , ,**

Mailing Address P. O. Box 690068

City: Vero Beach State: FL Zip Code: 32969

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

Name of Employer: self-employed Occupation: citrus farmer

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2018

Transaction ID : **C-291-00410B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**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: PAGE 7 OF 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Dodds, Helen Z., , ,**  
 Mailing Address 4321 Summer Breeze Terrace  
 City: Vero Beach State: FL Zip Code: 32967  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: n/a Occupation: retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 31 / 2018  
**Transaction ID : C-355-017u04**  
 Amount of Each Receipt this Period: 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ferrell, William B., , ,**  
 Mailing Address 12546 N. Highway A1A  
 City: Vero Beach State: FL Zip Code: 32963  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: Ferrell Real Estate Enterprises Occupation: realtor  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date: 450.00

Date of Receipt: 07 / 21 / 2018  
**Transaction ID : C-415-002G0F**  
 Amount of Each Receipt this Period: 100.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Finley, Catherine A., , ,**  
 Mailing Address 9892 Riverview Drive  
 City: Micco State: FL Zip Code: 32976  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: n/a Occupation: retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 21 / 2018  
**Transaction ID : C-419-02Kx01**  
 Amount of Each Receipt this Period: 250.00  
 Memo Item

**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)		PAGE 8 OF 47	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Fischer, Elizabeth, , ,**

Mailing Address P. O. Box 780068

City Sebastian	State FL	Zip Code 32978
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation homemaker
-------------------------	-------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1050.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 21 / 2018

**Transaction ID : C-424-023C03**

Amount of Each Receipt this Period  
1050.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Fischer, Henry A., , ,**

Mailing Address P. O. Box 780068

City Sebastian	State FL	Zip Code 32978
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FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed	Occupation dentist
-----------------------------------	-----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4900.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 21 / 2018

**Transaction ID : C-429-00270M**

Amount of Each Receipt this Period  
700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Gower, Ellen M., , ,**

Mailing Address 7435 Cypress Bend

City Vero Beach	State FL	Zip Code 32966
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FEC ID number of contributing federal political committee. **C**

Name of Employer n/a	Occupation retired
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Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 21 / 2018

**Transaction ID : C-508-012m04**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2250.00
<b>TOTAL</b> 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 9 OF 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Reed, James M., , ,**

Mailing Address 285 Bourdeaux Drive, S.W.

City: Vero Beach State: FL Zip Code: 32968

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

Name of Employer: Canon Int'l, Inc. Occupation: supervisor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2018

Transaction ID : **C-1033-02L301**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Richards, Warren T., , ,**

Mailing Address 7664 Great Bear Lake Drive

City: Micco State: FL Zip Code: 32976

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

Name of Employer: n/a Occupation: retired

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2018

Transaction ID : **C-1049-01Wm07**

Amount of Each Receipt this Period  
 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Robinson, Peter G., , ,**

Mailing Address 315 Greytwig Road

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: Laurel Agency, Inc. Occupation: realtor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2018

Transaction ID : **C-1060-002D03**

Amount of Each Receipt this Period  
 300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3100.00

**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: PAGE 10 OF 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Sadhwani, Harish, , ,**  
 Mailing Address 8701 U.S. Highway 1  
 City Sebastian State FL Zip Code 32958  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Quality Health Care Occupation physician  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 03 / 2018  
**Transaction ID : C-1089-02Ko01**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sexton, Chris, , ,**  
 Mailing Address P. O. Box 2187  
 City Vero Beach State FL Zip Code 32961  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2018  
**Transaction ID : C-1139-02L401**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Stork, Carmen N., , ,**  
 Mailing Address 2900 59th Avenue  
 City Vero Beach State FL Zip Code 32966  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2018  
**Transaction ID : C-1219-01SN0C**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3950.00  
**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: PAGE 11 OF 47  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Tole, Joseph A., , ,**

Mailing Address 5797 Treasure Lane

City Grant State FL Zip Code 32949

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

Name of Employer Bay Street Pharmacy Occupation vice-president

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2018

**Transaction ID : C-1274-02LD01**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Tole, Theresa W., , ,**

Mailing Address 5797 Treasure Lane

City Grant State FL Zip Code 32949

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

Name of Employer Bay Street Pharmacy, Inc. Occupation pharmacist

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2018

**Transaction ID : C-1275-01UA05**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Zudans, John V., , ,**

Mailing Address 3845 Indian River Drive, E.

City Vero Beach State FL Zip Code 32963

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

Name of Employer Florida Eye Institute Occupation physician

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 24 / 2018

**Transaction ID : C-1410-00Wt09**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	23350.00

**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 12 OF 47	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**American Academy of Ophthalmology PAC**

Mailing Address 655 Beach Street

City San Francisco	State CA	Zip Code 94109
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FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 08 / 2018

**Transaction ID : C-21-00Jo0G**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 1061 American Lane

City Schaumburg	State IL	Zip Code 60173
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FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 06 / 2018

**Transaction ID : C-40-00AQ0K**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation & NBCUniversal PAC**

Mailing Address 1 Comcast Center  
1701 JFK Blvd.

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
07 / 30 / 2018

**Transaction ID : C-272-00XB0G**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> 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 13 OF 47	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation & NBCUniversal PAC**

Mailing Address 1 Comcast Center  
1701 JFK Blvd.

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2018

**Transaction ID : C-273-00XB0H**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ESOP PAC**

Mailing Address 1200 18th Street, N.W., #1125

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2018

**Transaction ID : C-372-02LC01**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Embraer Aircraft Holding, Inc. PAC**

Mailing Address 276 S.W. 34th Street

City Fort Lauderdale	State FL	Zip Code 33315
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00472225

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2018

**Transaction ID : C-388-01F208**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3000.00
<b>TOTAL</b> 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 14 OF 47  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**House Freedom Fund**

Mailing Address P. O. Box 1948

City: Alexandria State: VA Zip Code: 22313

FEC ID number of contributing federal political committee: **C** C00552851

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 08 / 2018

Transaction ID : **C-596-02Be02**

Amount of Each Receipt this Period: 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corp. Employees' PAC**

Mailing Address 2121 Crystal Drive, #100

City: Arlington State: VA Zip Code: 22202

FEC ID number of contributing federal political committee: **C** C00303024

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 10000.00

Date of Receipt: 07 / 20 / 2018

Transaction ID : **C-750-00Th0e**

Amount of Each Receipt this Period: 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Natl. Assn. of Ins. & Fin. Advisors PAC**

Mailing Address 2901 Telestar Court

City: Falls Church State: VA Zip Code: 22042

FEC ID number of contributing federal political committee: **C** C00005249

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5000.00

Date of Receipt: 07 / 30 / 2018

Transaction ID : **C-892-00SG0K**

Amount of Each Receipt this Period: 3000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 5000.00

**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 15 OF 47	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**National Community Pharmacists Assn. PAC**

Mailing Address 100 Daingerfield Road

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2018

**Transaction ID : C-901-00W305**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Raytheon PAC**

Mailing Address 1100 Wilson Blvd., #1500

City Arlington	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2018

**Transaction ID : C-1028-02Kt01**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Raytheon PAC**

Mailing Address 1100 Wilson Blvd., #1500

City Arlington	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2018

**Transaction ID : C-1029-02Kt02**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 3000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____, _____, _____ 6000.00
<b>TOTAL</b> 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 16 OF 47	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**USAA Employee PAC**

Mailing Address 9800 Fredericksburg Road

City San Antonio	State TX	Zip Code 78288
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2018

**Transaction ID : C-1301-00pn0A**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**United Parcel Service PAC**

Mailing Address 55 Glenlake Parkway, N.E.

City Atlanta	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2018

**Transaction ID : C-1307-00if05**

Amount of Each Receipt this Period  
500.00

Memo Item

**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 Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25000.00



# 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 17 OF 47	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A.** Full Name (Last, First, Middle Initial)  
**Brevard County SOE**

Mailing Address P. O. Box 410819

City Melbourne	State FL	Zip Code 32941
-------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2018

**Transaction ID : C-175-006z05**

Amount of Each Receipt this Period

Memo Item  
petition verif. refund

**B.** 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 Y

Amount of Each Receipt this Period

Memo Item

**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 Y

Amount of Each Receipt this Period

Memo Item

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

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

<input type="text" value="95.50"/>
<input type="text" value="95.50"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2018	
Mailing Address P. O. Box 6463			FEC Identification Number C	
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period 685.97	
Purpose of Disbursement telephone		Category/ Type	Transaction ID : D33-00Hr21	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Barclays</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2018	
Mailing Address P. O. Box 13337			FEC Identification Number C	
City Philadelphia	State PA	Zip Code 19110	Amount of Each Disbursement this Period 898.12	
Purpose of Disbursement credit card payment		Category/ Type	Transaction ID : D66-02KU02	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. JetBlue Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018	
Mailing Address 118-29 Queens Blvd.			FEC Identification Number C	
City Forest Hills	State NY	Zip Code 11375	Amount of Each Disbursement this Period 156.20	
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D4-01Ma1s	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1584.09
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. JetBlue Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2018	
Mailing Address 118-29 Queens Blvd.			FEC Identification Number C	
City Forest Hills	State NY	Zip Code 11375	Amount of Each Disbursement this Period 214.20	
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D5-01Ma1t	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. JetBlue Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2018	
Mailing Address 118-29 Queens Blvd.			FEC Identification Number C	
City Forest Hills	State NY	Zip Code 11375	Amount of Each Disbursement this Period 180.20	
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D6-01Ma1u	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Singh Car Service</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2018	
Mailing Address 10640 John Ayres Drive			FEC Identification Number C	
City Fairfax	State VA	Zip Code 22032	Amount of Each Disbursement this Period 24.00	
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D7-01HU0i	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. U.S. House of Representatives</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2018
Mailing Address Longworth Building		FEC Identification Number C
City Washington	State DC	Zip Code 20515
Purpose of Disbursement shirts		Amount of Each Disbursement this Period 93.50
Candidate Name		Transaction ID : D9-00Wb2A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2018
Mailing Address 800 Market Street, 7th Floor		FEC Identification Number C
City San Francisco	State CA	Zip Code 94102
Purpose of Disbursement transportation		Amount of Each Disbursement this Period 13.82
Candidate Name		Transaction ID : D10-01kP0q
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Barclays</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2018
Mailing Address P. O. Box 13337		FEC Identification Number C
City Philadelphia	State PA	Zip Code 19110
Purpose of Disbursement credit card payment		Amount of Each Disbursement this Period 1192.25
Candidate Name		Transaction ID : D67-02KU03
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1192.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. JetBlue Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018		
Mailing Address 118-29 Queens Blvd.			FEC Identification Number C		
City Forest Hills	State NY	Zip Code 11375	Amount of Each Disbursement this Period 178.20		
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D3-01Ma1p		
Candidate Name			<input checked="" type="checkbox"/> Memo Item Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. JetBlue Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2018		
Mailing Address 118-29 Queens Blvd.			FEC Identification Number C		
City Forest Hills	State NY	Zip Code 11375	Amount of Each Disbursement this Period 339.19		
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D4-01Ma1q		
Candidate Name			<input checked="" type="checkbox"/> Memo Item Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. JetBlue Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018		
Mailing Address 118-29 Queens Blvd.			FEC Identification Number C		
City Forest Hills	State NY	Zip Code 11375	Amount of Each Disbursement this Period 295.00		
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D5-01Ma1r		
Candidate Name			<input checked="" type="checkbox"/> Memo Item Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 23 OF 47  
(check only one)  
 17     18     19a     19b  
                   20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Singh Car Service</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2018		
Mailing Address 10640 John Ayres Drive			FEC Identification Number C		
City Fairfax	State VA	Zip Code 22032	Amount of Each Disbursement this Period 24.00		
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D7-01HU0f		
Candidate Name		<input checked="" type="checkbox"/> Memo Item    Credit Card Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

Full Name (Last, First, Middle Initial) <b>B. Singh Car Service</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2018		
Mailing Address 10640 John Ayres Drive			FEC Identification Number C		
City Fairfax	State VA	Zip Code 22032	Amount of Each Disbursement this Period 24.00		
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D8-01HU0g		
Candidate Name		<input checked="" type="checkbox"/> Memo Item    Credit Card Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

Full Name (Last, First, Middle Initial) <b>c. Singh Car Service</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2018		
Mailing Address 10640 John Ayres Drive			FEC Identification Number C		
City Fairfax	State VA	Zip Code 22032	Amount of Each Disbursement this Period 13.52		
Purpose of Disbursement transportation		Category/ Type	Transaction ID : D9-01HU0h		
Candidate Name		<input checked="" type="checkbox"/> Memo Item    Credit Card Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2018	
Mailing Address 300 First Street, S.E.			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 253.51	
Purpose of Disbursement food & beverages/dues		Category/ Type	Transaction ID : D140-00WL2r	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2018	
Mailing Address 300 First Street, S.E.			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 334.55	
Purpose of Disbursement food & beverages/dues		Category/ Type	Transaction ID : D141-00WL2s	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2018	
Mailing Address 300 First Street, S.E.			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 98.34	
Purpose of Disbursement food & beverages/dues		Category/ Type	Transaction ID : D142-00WL2t	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	686.40
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Citibank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2018
Mailing Address P. O. Box 78025		FEC Identification Number C
City Phoenix	State AZ	Zip Code 85062
Purpose of Disbursement credit card payment		Amount of Each Disbursement this Period 547.10
Candidate Name		Transaction ID : D172-01Fx03
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. House of Representatives</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2018
Mailing Address Longworth Building		FEC Identification Number C
City Washington	State DC	Zip Code 20515
Purpose of Disbursement gifts		Amount of Each Disbursement this Period 547.10
Candidate Name		Transaction ID : D1-00Wb29
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Data Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2018
Mailing Address 6211 N.W. 132nd Street		FEC Identification Number C
City Gainesville	State FL	Zip Code 32653
Purpose of Disbursement direct mail services		Amount of Each Disbursement this Period 1150.00
Candidate Name		Transaction ID : D238-00GI2A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1697.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Data Targeting, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2018
Mailing Address 6211 N.W. 132nd Street		FEC Identification Number C
City Gainesville	State FL	Zip Code 32653
Purpose of Disbursement direct mail services		Amount of Each Disbursement this Period 7600.00
Candidate Name		Transaction ID : D239-00GI2B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kirsten Dougherty</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2018
Mailing Address 3213 Duke Street, Suite 700		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement reimbursement		Amount of Each Disbursement this Period 1085.70
Candidate Name		Transaction ID : D251-02J002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hill Country Barbecue Market</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2018
Mailing Address 410 7th Street, N.W.		FEC Identification Number C
City Washington	State DC	Zip Code 20004
Purpose of Disbursement catering		Amount of Each Disbursement this Period 884.00
Candidate Name		Transaction ID : D1-01yb07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item Memo
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8685.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Hunan Dynasty Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2018	
Mailing Address 215 Pennsylvania Avenue			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 201.70	
Purpose of Disbursement food and beverage		Category/ Type	Transaction ID : D2-01HL03	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Memo		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Galaxy Medals, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2018	
Mailing Address 1125 White Drive			FEC Identification Number C	
City Titusville	State FL	Zip Code 32780	Amount of Each Disbursement this Period 700.00	
Purpose of Disbursement coins		Category/ Type	Transaction ID : D298-01yr08	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Gavin, Patrick D., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2018	
Mailing Address 3210 Parkplace Court			FEC Identification Number C	
City Melbourne	State FL	Zip Code 32934	Amount of Each Disbursement this Period 461.75	
Purpose of Disbursement salary		Category/ Type	Transaction ID : D321-00GJ1r	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1161.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Indian River Republican Exec. Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018	
Mailing Address P. O. Box 6569			FEC Identification Number C	
City Vero Beach	State FL	Zip Code 32961	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement event ticket		Category/ Type	Transaction ID : D407-00qS0C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. KB Strategic Group</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2018	
Mailing Address 3213 Duke Street, #700			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 4428.00	
Purpose of Disbursement fundraising consulting		Category/ Type	Transaction ID : D535-02C20B	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Melbourne-Schippers, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2018	
Mailing Address 10 Pierrepont Street			FEC Identification Number C	
City Brooklyn	State NY	Zip Code 11201	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement office rent-security depo		Category/ Type	Transaction ID : D564-02LB01	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5928.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Melbourne-Schippers, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2018	
Mailing Address 10 Pierrepont Street			FEC Identification Number C	
City Brooklyn	State NY	Zip Code 11201	Amount of Each Disbursement this Period 4350.32	
Purpose of Disbursement office rent		Category/ Type	Transaction ID : D565-02LB02	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. National Veterans Homeless Support, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2018	
Mailing Address 7075 N. Cocoa Blvd., #700			FEC Identification Number C	
City Port Saint John	State FL	Zip Code 32927	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement event tickets		Category/ Type	Transaction ID : D584-02Kq01	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Posey, Katie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2018	
Mailing Address 1803 Hensley Drive			FEC Identification Number C	
City Rockledge	State FL	Zip Code 32955	Amount of Each Disbursement this Period 144.97	
Purpose of Disbursement mileage		Category/ Type	Transaction ID : D690-00Ku0a	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5495.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Republican Women's Federal Forum</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2018
Mailing Address P. O. Box 3571		FEC Identification Number C
City Merrifield	State VA	Zip Code 22116
Purpose of Disbursement event tickets	Candidate Name	Amount of Each Disbursement this Period 79.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D737-00Yi0u
State: District:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Republican Women's Federal Forum</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2018
Mailing Address P. O. Box 3571		FEC Identification Number C
City Merrifield	State VA	Zip Code 22116
Purpose of Disbursement dues	Candidate Name	Amount of Each Disbursement this Period 125.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D738-00Yi0v
State: District:	Category/Type	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Space Coast Honor Flight</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2018
Mailing Address P. O. Box 560975		FEC Identification Number C
City Rockledge	State FL	Zip Code 32956
Purpose of Disbursement event tickets	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D819-01yB02
State: District:	Category/Type	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1204.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. United States Treasury</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2018	
Mailing Address P. O. Box 105083			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30348	Amount of Each Disbursement this Period 76.50	
Purpose of Disbursement payroll taxes		Category/ Type	Transaction ID : D986-00Uq20	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. VISA</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018	
Mailing Address P. O. Box 4512			FEC Identification Number C	
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period 561.25	
Purpose of Disbursement credit card payment		Category/ Type	Transaction ID : D1074-02BF1N	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018	
Mailing Address 6600 N. Military Trail			FEC Identification Number C	
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 164.65	
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D3-00lw3T	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	637.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2018
Mailing Address 6600 N. Military Trail		FEC Identification Number C
City Boca Raton	State FL	Zip Code 33496
Purpose of Disbursement office supplies		Amount of Each Disbursement this Period 182.09
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D4-001w3U <input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018
Mailing Address P. O. Box 4512		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment		Amount of Each Disbursement this Period 778.80
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D1075-02BF10 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. BJ's Wholesale Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2018
Mailing Address 1115 Palm Bay Road, N.E.		FEC Identification Number C
City Melbourne	State FL	Zip Code 32905
Purpose of Disbursement office supplies		Amount of Each Disbursement this Period 76.05
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D1-01yV03 <input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	778.80
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Google</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018	
Mailing Address 1600 Amphitheatre Parkway			FEC Identification Number C	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period 40.79	
Purpose of Disbursement email services		Category/ Type	Transaction ID : D2-01wY0k	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Hobby Lobby</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018	
Mailing Address 7201 Shoppes Drive, #101			FEC Identification Number C	
City Viera	State FL	Zip Code 32940	Amount of Each Disbursement this Period 42.79	
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D3-01yI0A	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2018	
Mailing Address 6600 N. Military Trail			FEC Identification Number C	
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 37.44	
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D4-00lw3V	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Publix Super Markets, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018
Mailing Address 3300 Publix Corporate Parkway		FEC Identification Number C
City Lakeland	State FL	Zip Code 33811
Purpose of Disbursement food & beverage		Amount of Each Disbursement this Period 12.80
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D5-00N10n <input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2018
Mailing Address 6105 N. Wickham Road		FEC Identification Number C
City Melbourne	State FL	Zip Code 32941
Purpose of Disbursement postage		Amount of Each Disbursement this Period 150.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D9-02Ki02 <input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wal-Mart Stores, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2018
Mailing Address 702 S.W. 8th Street		FEC Identification Number C
City Bentonville	State AR	Zip Code 72716
Purpose of Disbursement office supplies		Amount of Each Disbursement this Period 250.38
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D10-00Kw0t <input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

**A. VISA**

Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 4512

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement credit card payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 10 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 806.99

Transaction ID : D1076-02BF1P

Memo Item

**B. Domino's Pizza**

Full Name (Last, First, Middle Initial)  
Mailing Address 1200 S. Capitol Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement food & beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 106.96

Transaction ID : D1-01qS02

Memo Item Credit Card Item

**C. Hill Country Barbecue Market**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 7th Street, N.W.

City Washington State DC Zip Code 20004

Purpose of Disbursement catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 287.50

Transaction ID : D2-01yb05

Memo Item Credit Card Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 806.99

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. U.S. Senate Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2018
Mailing Address Dirksen Senate Office Building		FEC Identification Number C
City Washington	State DC	Zip Code 20002
Purpose of Disbursement gifts		Amount of Each Disbursement this Period 75.50
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D4-022W06 <input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. Senate Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2018
Mailing Address Dirksen Senate Office Building		FEC Identification Number C
City Washington	State DC	Zip Code 20002
Purpose of Disbursement gifts		Amount of Each Disbursement this Period 76.25
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D5-022W07 <input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. We The Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2018
Mailing Address 305 Pennsylvania Avenue, S.E.		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement food & beverage		Amount of Each Disbursement this Period 250.88
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D6-025L08 <input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018
Mailing Address P. O. Box 4512		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Candidate Name	Amount of Each Disbursement this Period 38.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D1077-02BF1Q
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018
Mailing Address P. O. Box 4512		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Candidate Name	Amount of Each Disbursement this Period 1532.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D1078-02BF1R
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2018
Mailing Address P. O. Box 6463		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement telephone	Candidate Name	Amount of Each Disbursement this Period 1230.49
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D1-00AS1x
State: District:		<input checked="" type="checkbox"/> Memo Item Credit Card Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1571.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. BJ's Wholesale Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2018	
Mailing Address 1115 Palm Bay Road, N.E.			FEC Identification Number C	
City Melbourne	State FL	Zip Code 32905	Amount of Each Disbursement this Period 192.59	
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D2-01yV04	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Google</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2018	
Mailing Address 1600 Amphitheatre Parkway			FEC Identification Number C	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period 45.00	
Purpose of Disbursement email services		Category/ Type	Transaction ID : D3-01wY01	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. VISA</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018	
Mailing Address P. O. Box 4512			FEC Identification Number C	
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period 772.59	
Purpose of Disbursement credit card payment		Category/ Type	Transaction ID : D1079-02BF1S	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	772.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Domino's Pizza</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2018	
Mailing Address 1200 S. Capitol Street, S.E.			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 111.98	
Purpose of Disbursement food & beverage		Category/ Type	Transaction ID : D1-01qS03	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Harris Teeter</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2018	
Mailing Address 401 M. Street, S.E., #383			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 35.49	
Purpose of Disbursement food & beverage		Category/ Type	Transaction ID : D3-01zB0K	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Hill Country Barbecue Market</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2018	
Mailing Address 410 7th Street, N.W.			FEC Identification Number C	
City Washington	State DC	Zip Code 20004	Amount of Each Disbursement this Period 287.50	
Purpose of Disbursement catering		Category/ Type	Transaction ID : D4-01yb06	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Sodexo</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2018
Mailing Address 9801 Washingtonian Blvd.		FEC Identification Number C
City Gaithersburg	State MD	Zip Code 20878
Purpose of Disbursement food & beverage	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 77.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D5-028g0W <input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. We The Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2018
Mailing Address 305 Pennsylvania Avenue, S.E.		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement food & beverage	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 226.02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D7-025L09 <input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018
Mailing Address P. O. Box 4512		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 222.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D1080-02BF1T <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	222.60
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Hawk 'n' Dove</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2018		
Mailing Address 329 Pennsylvania Avenue, S.E.			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 93.00		
Purpose of Disbursement food & beverage		Category/ Type	Transaction ID : D1-01zK05		
Candidate Name		<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

Full Name (Last, First, Middle Initial) <b>B. Hawk 'n' Dove</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2018		
Mailing Address 329 Pennsylvania Avenue, S.E.			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 58.20		
Purpose of Disbursement food & beverage		Category/ Type	Transaction ID : D2-01zK06		
Candidate Name		<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

Full Name (Last, First, Middle Initial) <b>c. Scarlet Oak Restaurant &amp; Bar</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2018		
Mailing Address 909 New Jersey Avenue, S.E.			FEC Identification Number C		
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 71.40		
Purpose of Disbursement food & beverage		Category/ Type	Transaction ID : D3-02CP04		
Candidate Name		<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:                  District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2018
Mailing Address P. O. Box 4512		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement credit card payment		Amount of Each Disbursement this Period 2218.09
Candidate Name		Transaction ID : D1081-02BF1U
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 4 Rivers Smokehouse</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2018
Mailing Address 2810 West Kennedy Blvd		FEC Identification Number C
City Orlando	State FL	Zip Code 32810
Purpose of Disbursement catering		Amount of Each Disbursement this Period 1622.84
Candidate Name		Transaction ID : D1-02LI01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Constant Contact</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2018
Mailing Address 1601 Trapelo Road		FEC Identification Number C
City Waltham	State MA	Zip Code 02451
Purpose of Disbursement email services		Amount of Each Disbursement this Period 65.00
Candidate Name		Transaction ID : D2-01vu0n
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item Credit Card Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2218.09
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2018		
Mailing Address 6600 N. Military Trail			FEC Identification Number C		
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 104.74		
Purpose of Disbursement office supplis		Category/ Type	Transaction ID : D3-00lw3W		
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2018		
Mailing Address 6600 N. Military Trail			FEC Identification Number C		
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 59.65		
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D4-00lw3X		
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018		
Mailing Address 6600 N. Military Trail			FEC Identification Number C		
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D5-00lw3Y		
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	<input checked="" type="checkbox"/> Memo Item <input type="checkbox"/> Credit Card Item			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018	
Mailing Address 6600 N. Military Trail			FEC Identification Number C	
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 154.08	
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D6-00lw3Z	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2018	
Mailing Address 6600 N. Military Trail			FEC Identification Number C	
City Boca Raton	State FL	Zip Code 33496	Amount of Each Disbursement this Period 34.24	
Purpose of Disbursement office supplies		Category/ Type	Transaction ID : D7-00lw3a	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Petals Flower and Gift Shoppes</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2018	
Mailing Address 455 Distribution Drive			FEC Identification Number C	
City Melbourne	State FL	Zip Code 32904	Amount of Each Disbursement this Period 53.50	
Purpose of Disbursement flowers		Category/ Type	Transaction ID : D8-01kK0L	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Credit Card Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. Robert Watkins &amp; Company, P.A.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2018	
Mailing Address 610 S. Boulevard			FEC Identification Number C	
City Tampa	State FL	Zip Code 33606	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement accounting services		Category/ Type	Transaction ID : D1119-001H2H	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Robert Watkins &amp; Company, P.A.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018	
Mailing Address 610 S. Boulevard			FEC Identification Number C	
City Tampa	State FL	Zip Code 33606	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement accounting services		Category/ Type	Transaction ID : D1120-001H2I	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. eDonations.com</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2018	
Mailing Address 117 N. Saint Asaph Street			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 293.87	
Purpose of Disbursement online fundraising		Category/ Type	Transaction ID : D1152-00G31x	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5293.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. eDonations.com</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018	
Mailing Address 117 N. Saint Asaph Street			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 191.58	
Purpose of Disbursement online fundraising		Category/ Type	Transaction ID : D1153-00G31y	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	191.58
<b>TOTAL</b> This Period (last page this line number only).....▶	40128.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Bill Posey**

Full Name (Last, First, Middle Initial) <b>A. NRCC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2018
Mailing Address 320 First Street, S.E.		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement excess funds		Amount of Each Disbursement this Period 15000.00
Candidate Name		Transaction ID : D582-00Ks0R
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15000.00