

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Rubio Victory Committee

ADDRESS (number and street)

228 S WASHINGTON STREET SUITE 115

Check if different  
than previously  
reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00494617

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 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)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

C

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Lisker, Lisa, R., ,

Type or Print Name of Treasurer

Signature of Treasurer

Lisker, Lisa, R., ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Rubio Victory Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2018</div>		<div>61545.90</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>30483.89</div>	
(c) Total Receipts (from Line 19) .....	<div>102500.00</div>	<div>157100.00</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>132983.89</div>	<div>218645.90</div>
7. Total Disbursements (from Line 31).....	<div>87112.91</div>	<div>172774.92</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>45870.98</div>	<div>45870.98</div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	



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

## 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 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Rubio Victory Committee**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04	/	01	/	2018

To:

M M	/	D D	/	Y Y Y Y Y Y
06	/	30	/	2018

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

85000.00

129600.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

85000.00

129600.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

17500.00

27500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

102500.00

157100.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

102500.00

157100.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

102500.00

157100.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	35648.72	99993.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35648.72	99993.87
22. Transfers to Affiliated/Other Party Committees.....	51464.19	67781.05
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	87112.91	172774.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87112.91	172774.92

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	102500.00	157100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	102500.00	152100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35648.72	99993.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35648.72	99993.87

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

**A. CHADWICK, JAMES, , MR., SR.**

Mailing Address 488 MEADOW LARK DR.

City  
SARASOTA

State  
FL

Zip Code  
34236-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

06 / 12 / 2018

Transaction ID : SA11A.1305867

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

**B. CHADWICK, MARTHA, B., MRS.,**

Mailing Address 488 MEADOW LARK DR.

City  
SARASOTA

State  
FL

Zip Code  
34236-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

06 / 12 / 2018

Transaction ID : SA11A.1305866

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

**C. CLARK, COY, A., MR.,**

Mailing Address 330 N. BABCOCK ST STE. 103

City  
MELBOURNE

State  
FL

Zip Code  
32935-7324

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF EMPLOYED

Occupation (for Individual)  
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 31 / 2018

Transaction ID : SA11A.1303723

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

**A. GIOIA, ANTHONY, H., AMBASSADOR,**

Mailing Address 925 DELAWARE AVE.  
APARTMENT 7D

City  
BUFFALO

State  
NY

Zip Code  
14209-1868

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.1305863

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. GLAUBITZ, LUANN, , ,**

Mailing Address 312 S. HARBOR CITY BLVD.  
STE. 4

City

MELBOURNE

State

FL

Zip Code

32901-1351

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2018

Transaction ID : SA11A.1305870

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

**C. GLAUBITZ, SCOTT, M., MR.,**

Mailing Address 312 S. HARBOR CITY BLVD.

City

MELBOURNE

State

FL

Zip Code

32901-1351

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
B.S.E. CONSULTANTS, INC.

Occupation (for Individual)  
ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2018

Transaction ID : SA11A.1305869

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

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

10000.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

**A. KHAN, CODY, , MR.,**

Mailing Address 243 EAGLE DRIVE

City  
PANAMA CITY BEACH

State  
FL

Zip Code  
32407-2821

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HILTON INN RESORT

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

Transaction ID : SA11A.1305880

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. LEE, CYNTHIA, R., MRS.,**

Mailing Address 13 SUNRISE CAY DRIVE

City  
KEY LARGO

State  
FL

Zip Code  
33037-5301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2018

Transaction ID : SA11A.1303722

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

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

**C. LEE, PATRICK, P., MR.,**

Mailing Address 13 SUNRISE CAY DRIVE

City  
KEY LARGO

State  
FL

Zip Code  
33037-5301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2018

Transaction ID : SA11A.1303721

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

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

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

35000.00



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

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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

**A. MCNAMARA, JENNIFER, L., MS,**

Mailing Address 5 HAMPTON CT

City  
ORCHARD PARK

State  
NY

Zip Code  
14127-3461

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : SA11A.1305864**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. ROMANDETTI, KRIS, , ,**

Mailing Address 709 S. HARBOR CITY BLVD. STE. 250

City  
MELBOURNE

State  
FL

Zip Code  
32901-1942

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FIRST CHOICE MEDICAL GROUP OF BREVARD,

Occupation (for Individual)  
V.P. OF MEDICAL OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 25 / 2018

**Transaction ID : SA11A.1305873**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. SANCHEZ, DOMINGO, , MR.,**

Mailing Address 2800 VICKIE CT.

City  
KISSIMMEE

State  
FL

Zip Code  
34744-5124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 25 / 2018

**Transaction ID : SA11A.1305877**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

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

15000.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

**A. SWEET, MARTIN, JAY, MR. ,**

Mailing Address 3426 COMMUNITY DRIVE

City  
JUPITER

State  
FL

Zip Code  
33458-8751

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FLORIDA UNIVERSITY

Occupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2018

Transaction ID : SA11A.1305865

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**B. UNDERWOOD, KEN, LEE, ,**

Mailing Address 5336 CHANDLER BEND DRIVE

City  
JACKSONVILLE

State  
FL

Zip Code  
32224-0843

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL SAFETY COMMISSION

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 25 / 2018

Transaction ID : SA11A.1305878

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

**C. SMITH & ASSOCIATES**

Mailing Address 1499 S. HARBOR CITY BLVD.  
STE. 202

City  
MELBOURNE

State  
FL

Zip Code  
32901-3245

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 25 / 2018

Transaction ID : SA11A.1305874

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SEE PARTNER ATTRIBUTION; SEE ATTRIBUTION  
BELOW

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

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

15000.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

**A. SMITH, GEOFFREY, , MR.,**

Mailing Address 122 LANSING ISLAND DR.

City  
**INDIAN HARBOUR BEA**

State  
**FL**

Zip Code  
**32937-5352**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
**SMITH & ASSOCIATES**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**06** / **25** / **2018**

Transaction ID : SA11A.1305876

Amount of Each Receipt this Period

2500.00

☒ Memo Item  
 CONTRIBUTION

**SMITH & ASSOCIATES PARTNERSHIP  
 ATTRIBUTION**

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

**B. SMITH, SUSAN, , MRS.,**

Mailing Address 122 LANSING ISLAND DR.

City  
**INDIAN HARBOUR BEA**

State  
**FL**

Zip Code  
**32937-5352**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
**SMITH & ASSOCIATES**

Occupation (for Individual)  
**ATTORNEY**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**06** / **25** / **2018**

Transaction ID : SA11A.1305875

Amount of Each Receipt this Period

2500.00

☒ Memo Item  
 CONTRIBUTION

**SMITH & ASSOCIATES PARTNERSHIP  
 ATTRIBUTION**

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

0.00

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

85000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

## **A. FRIENDS OF MIKE H.**

Mailing Address 610 S. BOULEVARD

City  
TAMPA

State  
FL

Zip Code  
33606-2647

FEC ID number of contributing  
federal political committee.

C

C00492231

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 25 / 2018

Transaction ID : SA11C.1305872

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

## **B. A DUDA & SONS INC. PAC**

Mailing Address 1200 DUDA TRAIL

City  
OVIEDO

State  
FL

Zip Code  
32765-4507

FEC ID number of contributing  
federal political committee.

C

C00213231

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

Transaction ID : SA11C.1305879

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

## **C. JONES WALKER L.L.P. PAC**

Mailing Address 201 SAINT CHARLES AVENUE  
SUITE 5200

City  
NEW ORLEANS

State  
LA

Zip Code  
70170-5000

FEC ID number of contributing  
federal political committee.

C

C00111534

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2018

Transaction ID : SA11C.1305871

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

12500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

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

## **A. NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS PAC**

Mailing Address 1325 G. STREET NW  
SUITE 1000

City  
WASHINGTON

State  
DC

Zip Code  
20005-3134

FEC ID number of contributing  
federal political committee.

**C** C00109306

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **12** / **2018**

**Transaction ID : SA11C.1305868**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

5000.00

17500.00

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

PAGE 14 OF 18

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

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NAME OF COMMITTEE (In Full)

Rubio Victory Committee

Full Name (Last, First, Middle Initial)

**A. BB&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2018

Mailing Address 1909 K ST., NW

City  
WASHINGTONState  
DCZip Code  
20006-2720Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3081

Amount of Each Disbursement this Period

45.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BB&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2018

Mailing Address 1909 K ST., NW

City  
WASHINGTONState  
DCZip Code  
20006-2720Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3081

Amount of Each Disbursement this Period

45.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2018

Mailing Address 1909 K ST., NW

City  
WASHINGTONState  
DCZip Code  
20006-2720Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB21B.I3081

Amount of Each Disbursement this Period

12.00

☐ Memo Item

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

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

103.80

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

PAGE 15 OF 18

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

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NAME OF COMMITTEE (In Full)

Rubio Victory Committee

Full Name (Last, First, Middle Initial)

**A. BB&T**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		15		2018

Mailing Address 1909 K ST., NW

City  
WASHINGTONState  
DCZip Code  
20006-2720Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I3081

Amount of Each Disbursement this Period

45.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUCKABY DAVIS LISKER INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		26		2018

Mailing Address 228 S. WASHINGTON ST, STE. 115

City  
ALEXANDRIAState  
VAZip Code  
22314-5408Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I30821

Amount of Each Disbursement this Period

1658.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOCKO STRATEGIES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2018

Mailing Address 2438 TUNLAW RD., NW

City  
WASHINGTONState  
DCZip Code  
20007Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I3081

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

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

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

11704.07

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

PAGE 16 OF 18

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

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NAME OF COMMITTEE (In Full)

Rubio Victory Committee

Full Name (Last, First, Middle Initial)

**A. SOCKO STRATEGIES LLC**

Mailing Address 2438 TUNLAW RD., NW

City  
WASHINGTONState  
DCZip Code  
20007Purpose of Disbursement  
FUNDRAISING CONSULTING/TRAVEL/CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2018

FEC Identification Number

C

Transaction ID : SB21B.I3082I

Amount of Each Disbursement this Period

23766.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

23766.00

35573.87



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

PAGE 17 OF 18

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

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NAME OF COMMITTEE (In Full)

**Rubio Victory Committee**

Full Name (Last, First, Middle Initial)

**A. MARCO RUBIO FOR SENATE**Mailing Address 228 S. WASHINGTON ST  
STE. 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

**RUBIO, MARCO, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

**C** C00620518**Transaction ID : SB22.I30822**

Amount of Each Disbursement this Period

7328.00

2016 GENERAL ELECTION DEBT

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARCO RUBIO FOR SENATE**Mailing Address 228 S. WASHINGTON ST  
STE. 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

**RUBIO, MARCO, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

**C** C00620518**Transaction ID : SB22.I30823**

Amount of Each Disbursement this Period

7797.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARCO RUBIO FOR SENATE**Mailing Address 228 S. WASHINGTON ST  
STE. 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

**RUBIO, MARCO, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2018

FEC Identification Number

**C** C00620518**Transaction ID : SB22.I30824**

Amount of Each Disbursement this Period

9800.71

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

24926.63

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

PAGE 18 OF 18

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

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NAME OF COMMITTEE (In Full)

Rubio Victory Committee

Full Name (Last, First, Middle Initial)

**A. RECLAIM AMERICA PAC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		30		2018

Mailing Address 228 S WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314-5404Purpose of Disbursement  
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00500025

Transaction ID : SB22.I30825

Amount of Each Disbursement this Period

12047.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF FLORIDA**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
06		30		2018

Mailing Address 420 E. JEFFERSON STREET

City  
TALLAHASSEEState  
FLZip Code  
32301-0311Purpose of Disbursement  
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00099259

Transaction ID : SB22.I30826

Amount of Each Disbursement this Period

14489.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

26537.56

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

51464.19