

**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

Frontline Fighters PAC

ADDRESS (number and street)

5415 Lake Howell Road

#216

Check if different
than previously
reported. (ACC)

Winter Park

FL

32792

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00904318

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(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

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.

Type or Print Name of Treasurer

Giarraputo, Holly, , ,

Signature of Treasurer

Giarraputo, Holly, , ,

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

Frontline Fighters PAC

Report Covering the Period: From:

M M	D D	Y Y Y Y Y
01	01	2026

 To:

M M	D D	Y Y Y Y Y
01	31	2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		244459.82
(b) Cash on Hand at Beginning of Reporting Period.....	244459.82	
(c) Total Receipts (from Line 19)	4482.37	4482.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	248942.19	248942.19
7. Total Disbursements (from Line 31).....	150320.85	150320.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	98621.34	98621.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Frontline Fighters PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01	/	01	/	2026

To:

M M	/	D D	/	Y Y Y Y
01	/	31	/	2026

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).....	550.00	550.00
(ii) Unitemized	3074.77	3074.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3624.77	3624.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3624.77	3624.77
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.).....	857.60	857.60
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))	4482.37	4482.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4482.37	4482.37

DETAILED SUMMARY PAGE of Disbursements

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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	150060.85	150060.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	150060.85	150060.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	260.00	260.00
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)) ..	150320.85	150320.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	150320.85	150320.85

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3624.77	3624.77
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3624.77	3624.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	150060.85	150060.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	150060.85	150060.85

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

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

FOR LINE NUMBER: PAGE 6 OF 25
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

Frontline Fighters PAC

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

A. Brooks, Cheryl, , ,

Mailing Address 10220 N 97th Ave Unit B

City
Peoria

State
AZ

Zip Code
85345

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Unemployed

Occupation (for Individual)
Unemployed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 06 / 2026

Transaction ID : A-171

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Maglio, Jennifer, , ,

Mailing Address 111 S Pineapple Ave Unit 1213

City
Sarasota

State
FL

Zip Code
34236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mclaw

Occupation (for Individual)
Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 06 / 2026

Transaction ID : A-191

Amount of Each Receipt this Period

300.00

☐ 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

M M / D D / 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)..... ►

550.00

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 25
(check only one)

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

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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

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

A. Actblue technical services

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

553.60

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 12 / 2026**Transaction ID : A-285**

Amount of Each Receipt this Period

553.60

☐ Memo Item

Vendor refund

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

B. Seminole county Democratic Party

Mailing Address 250 South Ronald Reagan Boulevard

City
LongwoodState
FLZip Code
32750FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 23 / 2026**Transaction ID : A-279**

Amount of Each Receipt this Period

260.00

☐ Memo Item

Vendor refund

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

M M / D D / 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)..... ►

813.60

813.60

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Armstrong, Frank, , ,

Mailing Address 4031 Poinciana Ave

City
Coconut GroveState
FLZip Code
33133-6328

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-53

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blinken, Anthony, , ,

Mailing Address 412 Chain Bridge Rd

City
McLeanState
VAZip Code
22101-1905

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3		2	0	2	6		

FEC Identification Number

C

Transaction ID : B-49

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brown, Eleanor, , ,

Mailing Address 520 Sheridan St NW

City
WashingtonState
DCZip Code
20011-1241

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-41

Amount of Each Disbursement this Period

7000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

11500.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Brown, R. Ben, , ,

Mailing Address 1600 Clarendon Blvd Apt 405

City
ArlingtonState
VAZip Code
22209-4200

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-51

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Compliance Inc.

Mailing Address 946 Bandmann Trl

City
MissoulaState
MTZip Code
59802

Purpose of Disbursement

Bookkeeping

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-16

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chanin, Nancy, , ,Mailing Address 200 Northeast 2nd Avenue
Apt. 408City
Delray BeachState
FLZip Code
33444

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-271

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10000.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Cho-Smith, Bennett, , ,

Mailing Address 1435 25th Ave

City
San FranciscoState
CAZip Code
94122-3317

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-61

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Frantz, Casey, , ,

Mailing Address 2518 S Melrose St

City
TacomaState
WAZip Code
98405-2650

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-46

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Frantz, Travis, , ,

Mailing Address 2518 S Melrose St

City
TacomaState
WAZip Code
98405-2650

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-60

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

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

17500.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Hatcher, Bob, , ,

Mailing Address 945 NW 17th Ave

City
OcalaState
FLZip Code
34475-5317

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-58

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hogenkamp, Daniel, , ,

Mailing Address 645 Prospect Hill Rd

City
RutlandState
VTZip Code
05701-9442

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-44

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kane, Michael, , ,

Mailing Address 1756 Avenida Segovia

City
OceansideState
CAZip Code
92056-6239

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-54

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

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

3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Lo, Allen, , ,

Mailing Address 135 Commonwealth Dr

City
Menlo ParkState
CAZip Code
94025-1105

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-43

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McGrail, Lily, , ,

Mailing Address 1192 Windrock Dr

City
McLeanState
VAZip Code
22102-1547

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-45

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Miller, Gilbert, , ,

Mailing Address 5059 Knotty Pine Ct

City
SanfordState
FLZip Code
32771-8339

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-56

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

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

8000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Miller, Jamee, , ,

Mailing Address 1600 W Ivanhoe Blvd

City
OrlandoState
FLZip Code
32804-5808

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-50

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Moulder, Jason, , ,

Mailing Address 2707 Adams Mill Rd NW Apt 108

City
WashingtonState
DCZip Code
20009-2113

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-62

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP Van Inc.

Mailing Address 10803 N Mopac Expy # 2

City
AustinState
TXZip Code
78759-5461

Purpose of Disbursement

Office supplies

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-21

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

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

10000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. NGP Van Inc.

Mailing Address 10801 N Mopac Expy # 2

City
AustinState
TXZip Code
78759-5459

Purpose of Disbursement

Office supplies

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-25

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP Van Inc.

Mailing Address 10802 N Mopac Expy # 2

City
AustinState
TXZip Code
78759-5460

Purpose of Disbursement

Office supplies

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-5

Amount of Each Disbursement this Period

8397.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payroll Data Processing

Mailing Address 4225 Henderson Blvd

City
TampaState
FLZip Code
33629-5612

Purpose of Disbursement

Payroll and taxes

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-17

Amount of Each Disbursement this Period

443.62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10340.62

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City
TampaState
FLZip Code
33629-5611

Purpose of Disbursement

Payroll and taxes

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-29

Amount of Each Disbursement this Period

595.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City
TampaState
FLZip Code
33629-5611

Purpose of Disbursement

Payroll(vendors that aggregate over \$200 listed below)

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-36

Amount of Each Disbursement this Period

3154.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Payroll Data Processing

Mailing Address 4228 Henderson Blvd

City
TampaState
FLZip Code
33629-5615

Purpose of Disbursement

Payroll and taxes

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-14

Amount of Each Disbursement this Period

2086.32

☐ Memo Item

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

5836.32

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Payroll Data Processing

Mailing Address 4229 Henderson Blvd

City
TampaState
FLZip Code
33629-5616

Purpose of Disbursement

Payroll taxes

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	2	6	

FEC Identification Number

C

Transaction ID : B-26

Amount of Each Disbursement this Period

1143.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Payroll Data Processing

Mailing Address 4224 Henderson Blvd

City
TampaState
FLZip Code
33629-5611

Purpose of Disbursement

Payroll(vendors that aggregate over \$200 listed below)

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	2	6	

FEC Identification Number

C

Transaction ID : B-38

Amount of Each Disbursement this Period

9913.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Penman, Andrew, , ,

Mailing Address 1624 Swann St NW

City
WashingtonState
DCZip Code
20009-6401

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-40

Amount of Each Disbursement this Period

750.00

☐ Memo Item

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

11806.68

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Phillips, Kevin, , ,

Mailing Address 824 South Orleans Avenue

City
TampaState
FLZip Code
33606

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-280

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Phillips, Kevin, , ,

Mailing Address 824 South Orleans Avenue

City
TampaState
FLZip Code
33606

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-281

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Phillips, Lana, , ,

Mailing Address 824 South Orleans Avenue

City
TampaState
FLZip Code
33606

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-282

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Phillips, Lana, , ,

Mailing Address 824 South Orleans Avenue

City
TampaState
FLZip Code
33606

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-283

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Phillips, Spencer, , ,

Mailing Address 5415 Lake Howell Rd # 216

City
Winter ParkState
FLZip Code
32792-1034

Purpose of Disbursement

Salary

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-37

Amount of Each Disbursement this Period

3154.30

☒ Memo Item MEMO: Subvendor of-Payroll Data Processing

Full Name (Last, First, Middle Initial)

C. Phillips, Spencer, , ,

Mailing Address 5415 Lake Howell Rd # 216

City
Winter ParkState
FLZip Code
32792-1034

Purpose of Disbursement

Salary

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3		2	0	2	6		

FEC Identification Number

C

Transaction ID : B-39

Amount of Each Disbursement this Period

9913.68

☒ Memo Item MEMO: Subvendor of-Payroll Data Processing

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

3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Punch Up Strategies

Mailing Address 2810 Vine St

City
OrlandoState
FLZip Code
32806-2550

Purpose of Disbursement

Political consulting

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-22

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Punch Up Strategies

Mailing Address 2811 Vine St

City
OrlandoState
FLZip Code
32806-2551

Purpose of Disbursement

Political consulting

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	4			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-30

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rankin, S. Louise, , ,

Mailing Address 1600 Clarendon Blvd Apt 405

City
ArlingtonState
VAZip Code
22209-4200

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-63

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

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

13000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Resonance Campaigns

Mailing Address 1319 F St NW Ste 301

City
WashingtonState
DCZip Code
20004-1140

Purpose of Disbursement

Printing

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-48

Amount of Each Disbursement this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sapphire Strategies

Mailing Address 3225 Mckinley St NW

City
WashingtonState
DCZip Code
20015-1634

Purpose of Disbursement

Email fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-18

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sapphire Strategies

Mailing Address 3226 Mckinley St NW

City
WashingtonState
DCZip Code
20015-1635

Purpose of Disbursement

Email fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-10

Amount of Each Disbursement this Period

3636.98

☐ Memo Item

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

11436.98

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Sapphire Strategies

Mailing Address 3228 Mckinley St NW

City
WashingtonState
DCZip Code
20015-1637

Purpose of Disbursement

Email fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B-15

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sapphire Strategies

Mailing Address 3229 Mckinley St NW

City
WashingtonState
DCZip Code
20015-1638

Purpose of Disbursement

Email fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B-27

Amount of Each Disbursement this Period

1796.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sapphire Strategies

Mailing Address 3227 Mckinley St NW

City
WashingtonState
DCZip Code
20015-1636

Purpose of Disbursement

Email fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : B-34

Amount of Each Disbursement this Period

2498.46

☐ Memo Item

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

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

10295.22

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Siegel, Andy, , ,

Mailing Address 11603 SW Hawkins Ter

City
Port Saint LucieState
FLZip Code
34987-5404

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-55

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Solomon, Luke, , ,

Mailing Address 37 2nd St

City
BrooklynState
NYZip Code
11231-5508

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-42

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stanford Campaigns

Mailing Address 3232 Mckinney Ave Ste Pm 500

City
DallasState
TXZip Code
75204-7439

Purpose of Disbursement

Research consultant

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : B-19

Amount of Each Disbursement this Period

4464.00

☐ Memo Item

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

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

8464.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Switchboard Public Benefit Corp.

Mailing Address PO Box 33485

City
WashingtonState
DCZip Code
20033-0485

Purpose of Disbursement

Texting

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-11

Amount of Each Disbursement this Period

2301.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Trey, Peter, , ,

Mailing Address 401 Southcroft Road

City
SpringfieldState
PAZip Code
19064

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-272

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wolf, Janet, , ,

Mailing Address 3018 McCall Boulevard

City
StatesboroState
GAZip Code
30461

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-273

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2901.10

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

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Wolf, Janet, , ,

Mailing Address 3018 McCall Boulevard

City
StatesboroState
GAZip Code
30461

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-274

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wolf, Janet, , ,

Mailing Address 3018 McCall Boulevard

City
StatesboroState
GAZip Code
30461

Purpose of Disbursement

Refund

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-275

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement 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)..... ►

400.00

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

148980.92

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Frontline Fighters PAC

Full Name (Last, First, Middle Initial)

A. Seminole county Democratic Party

Mailing Address 250 South Ronald Reagan Boulevard

City
LongwoodState
FLZip Code
32750

Purpose of Disbursement

Event sponsorship

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B-35

Amount of Each Disbursement this Period

260.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement 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

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement 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).....▶

260.00

260.00