

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name
ANGIE FOR FLORIDA

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))	<input type="text" value="195903.35"/>	<input type="text" value="195903.35"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="195903.35"/>	<input type="text" value="195903.35"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="18308.07"/>	<input type="text" value="18308.07"/>
(b) Total Offsets to Operating Expenditures (from Line 14)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	<input type="text" value="18308.07"/>	<input type="text" value="18308.07"/>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<input type="text" value="177595.28"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ANGIE FOR FLORIDA

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

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).....	116962.07	116962.07
(ii) Unitemized.....	78941.28	78941.28
(iii) TOTAL of contributions from individuals ▶	195903.35	195903.35
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	195903.35	195903.35
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	195903.35	195903.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18308.07	18308.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	18308.07	18308.07

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	195903.35
25. SUBTOTAL (add Line 23 and Line 24).....	195903.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	18308.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	177595.28

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 77
(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)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Adams, Charisma, , ,

Mailing Address 3018 Laurel Ridge Cir

City: Riviera Beach State: FL Zip Code: 33404

FEC ID number of contributing federal political committee: C

Name of Employer: Articulate Consulting Occupation: Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 14 / 2026

Transaction ID : SA11AI.7461

Amount of Each Receipt this Period: 500.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Ali, Sadiq, , ,

Mailing Address 21750 Marigot Drive

City: Boca Raton State: FL Zip Code: 33428

FEC ID number of contributing federal political committee: C

Name of Employer: All Cellular Occupation: Manager

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 03 / 31 / 2026

Transaction ID : SA11AI.9721

Amount of Each Receipt this Period: 100.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Alingu, Jonathan, , ,

Mailing Address 10133 Airy Oaks Ct

City: Weeki Wachee State: FL Zip Code: 34613

FEC ID number of contributing federal political committee: C

Name of Employer: JWJ Occupation: Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 31 / 2026

Transaction ID : SA11AI.10030

Amount of Each Receipt this Period: 250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Allen, Elizabeth, , ,
Mailing Address 8381 Karpeal Dr
City Sarasota State FL Zip Code 34238
FEC ID number of contributing federal political committee. C
Name of Employer Not employed Occupation Not employed
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 04 2026
Transaction ID : SA11AI.6857
Amount of Each Receipt this Period
200.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Allen, Elizabeth, , ,
Mailing Address 8381 Karpeal Dr
City Sarasota State FL Zip Code 34238
FEC ID number of contributing federal political committee. C
Name of Employer Not employed Occupation Not employed
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 31 2026
Transaction ID : SA11AI.9363
Amount of Each Receipt this Period
200.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Baker, Chanae, , ,
Mailing Address 4700 SW Archer Road #90
City Gainesville State FL Zip Code 32608
FEC ID number of contributing federal political committee. C
Name of Employer Assurance Homecare Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 13 2026
Transaction ID : SA11AI.7403
Amount of Each Receipt this Period
500.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
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 77
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Baker, Chanae, , ,
Mailing Address 4700 SW Archer Road #90
City Gainesville State FL Zip Code 32608
FEC ID number of contributing federal political committee. C
Name of Employer Assurance Homecare Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 13 / 2026
Transaction ID : SA11AI.7404
Amount of Each Receipt this Period
100.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Bandes, Jillian, , ,
Mailing Address 1368 Spalding Road
City Dunedin State FL Zip Code 34698
FEC ID number of contributing federal political committee. C
Name of Employer Bandes Construction Occupation President
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026
Transaction ID : SA11AI.4285
Amount of Each Receipt this Period
500.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Bay, Tessa, , ,
Mailing Address 901 Pennsylvania Avenue
City Miami Beach State FL Zip Code 33139
FEC ID number of contributing federal political committee. C
Name of Employer Florida Alliance Occupation Executive Director
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026
Transaction ID : SA11AI.9831
Amount of Each Receipt this Period
250.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
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 8 OF 77
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Beesley, Roger, , ,
Mailing Address 1737 Albemarle Road
City Saint Petersburg State FL Zip Code 33764
FEC ID number of contributing federal political committee. C
Name of Employer Beesley Electric LLC Occupation Estimator/Manager
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2026
Transaction ID : SA11AI.7143
Amount of Each Receipt this Period
1000.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Beesley, Roger, , ,
Mailing Address 1737 Albemarle Road
City Saint Petersburg State FL Zip Code 33764
FEC ID number of contributing federal political committee. C
Name of Employer Beesley Electric LLC Occupation Estimator/Manager
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2026
Transaction ID : SA11AI.9166
Amount of Each Receipt this Period
100.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Belet, Austin, , ,
Mailing Address 6086 Terry Parker Dr S
City Jacksonville State FL Zip Code 32211
FEC ID number of contributing federal political committee. C
Name of Employer US Navy Occupation Sailor
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2026
Transaction ID : SA11AI.6861
Amount of Each Receipt this Period
75.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 1175.00
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 9 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Bozzetto, Renata, , ,

Mailing Address 9497 Boca Gardens Cir S

City Boca Raton	State FL	Zip Code 33496
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FEC ID number of contributing federal political committee. **C**

Name of Employer Florida Immigrant Coalition	Occupation Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period
500.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Brakken, Eric, , ,

Mailing Address 620 Forest St

City Windermere	State FL	Zip Code 34786
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FEC ID number of contributing federal political committee. **C**

Name of Employer EJB Strategies LLC	Occupation Consulting
--	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9955

Amount of Each Receipt this Period
3500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Callejas, Linda, , ,

Mailing Address 9068 SW 129th LN

City Miami	State FL	Zip Code 33176
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FEC ID number of contributing federal political committee. **C**

Name of Employer University of South Florida	Occupation Research/Professor
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2026

Transaction ID : SA11AI.5877

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	4250.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Canales, Dequasia, , ,

Mailing Address 7681 Northwest 53rd Street

City Fort Lauderdale	State FL	Zip Code 33351
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FEC ID number of contributing federal political committee.

Name of Employer 1199SEIU	Occupation Labor Rep
------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4361

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Cetnar, Jacqueline, , ,

Mailing Address 2025 Tickford St.

City Middleburg	State FL	Zip Code 32068
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FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7590

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Cetnar, Jacqueline, , ,

Mailing Address 2025 Tickford St.

City Middleburg	State FL	Zip Code 32068
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FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.10013

Amount of Each Receipt this Period

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="650.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Chandler, Victricia, , ,

Mailing Address 1001 SW 75th Ave

City: Plantation State: FL Zip Code: 33317

FEC ID number of contributing federal political committee: C

Name of Employer: Florida Rising Occupation: Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 02 / 05 / 2026

Transaction ID : SA11AI.5879

Amount of Each Receipt this Period: 300.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Chandler, Victricia, , ,

Mailing Address 1001 SW 75th Ave

City: Plantation State: FL Zip Code: 33317

FEC ID number of contributing federal political committee: C

Name of Employer: Florida Rising Occupation: Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 850.00

Date of Receipt: 03 / 31 / 2026

Transaction ID : SA11AI.9898

Amount of Each Receipt this Period: 550.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Changa, Anoa, , ,

Mailing Address 1955 LaDawn ln nw #M3

City: Atlanta State: GA Zip Code: 30318

FEC ID number of contributing federal political committee: C

Name of Employer: Ssa Occupation: Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 225.00

Date of Receipt: 03 / 25 / 2026

Transaction ID : SA11AI.7771

Amount of Each Receipt this Period: 75.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 925.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Choudhury, Nilu, , ,

Mailing Address 2847 Burwood Avenue

City Orlando State FL Zip Code 32837

FEC ID number of contributing federal political committee.

Name of Employer Self Employed Occupation Fundraiser

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 30 / 2026

Transaction ID : SA11AI.5670

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Ciraldo, Katrina, , ,

Mailing Address 1000 West Avenue 623

City Miami Beach State FL Zip Code 33139

FEC ID number of contributing federal political committee.

Name of Employer University of miami Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2026

Transaction ID : SA11AI.5901

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Clausen, Juli, , ,

Mailing Address 9206 Audubon Park Lane S

City Jacksonville State FL Zip Code 32257

FEC ID number of contributing federal political committee.

Name of Employer The Standard Occupation Compliance analyst

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2026

Transaction ID : SA11AI.5690

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 13 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

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

Mailing Address 2521C W. Maryland Ave.

City TAMPA	State FL	Zip Code 33629-6203
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FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5018

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Coward, Jennifer, , ,

Mailing Address 6073 Little Springs Court

City Jacksonville	State FL	Zip Code 32258
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Mayo Clinic Florida	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7775

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Coward, Jennifer, , ,

Mailing Address 6073 Little Springs Court

City Jacksonville	State FL	Zip Code 32258
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Mayo Clinic Florida	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.10004

Amount of Each Receipt this Period

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 77
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Cox, Reginald, , ,
Mailing Address 715 NW 2nd Street
City Delray Beach State FL Zip Code 33444
FEC ID number of contributing federal political committee. C
Name of Employer Reginald A. Cox & Assoc. Occupation Architect
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2026
Transaction ID : SA11AI.7120
Amount of Each Receipt this Period
1000.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Davidson, Katherine, , ,
Mailing Address 124 Oak St
City Neptune Beach State FL Zip Code 32266-6032
FEC ID number of contributing federal political committee. C
Name of Employer berkshire hathaway home services Occupation realtor
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2026
Transaction ID : SA11AI.6974
Amount of Each Receipt this Period
25.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Davidson, Katherine, , ,
Mailing Address 124 Oak St
City Neptune Beach State FL Zip Code 32266-6032
FEC ID number of contributing federal political committee. C
Name of Employer berkshire hathaway home services Occupation realtor
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 308.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2026
Transaction ID : SA11AI.7569
Amount of Each Receipt this Period
100.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
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 15 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Davis, Lauren, , ,

Mailing Address 791 Suwannee Ct NE

City SAINT PETERSBURG State FL Zip Code 33702

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2026

Transaction ID : SA11AI.5396

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Delegal, Julie, , ,

Mailing Address 424 East Monroe St.

City Jax State FL Zip Code 32202

FEC ID number of contributing federal political committee. C

Name of Employer Delegal Law Offices; self Occupation Writer/paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2026

Transaction ID : SA11AI.5382

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Diaz, Denise, , ,

Mailing Address 440 Elmcroft Blvd Apt 3302

City Rockville State MD Zip Code 20850

FEC ID number of contributing federal political committee. C

Name of Employer Jobs with Justice Occupation Non-profit manager

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2026

Transaction ID : SA11AI.7875

Amount of Each Receipt this Period
500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Ellis, Serena, , ,

Mailing Address 7050 NW 44th Ave # 604

City: Fort Lauderdale State: FL Zip Code: 33319

FEC ID number of contributing federal political committee: C

Name of Employer: Not Employed Occupation: Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4888

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Epstein, Eve, , ,

Mailing Address 1155 23rd avenue N

City: Saint Petersburg State: FL Zip Code: 33704

FEC ID number of contributing federal political committee: C

Name of Employer: EO Law Occupation: Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2026

Transaction ID : SA11AI.5113

Amount of Each Receipt this Period
500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Eskamani, Ida, , ,

Mailing Address 126 N. Mills Ave

City: Orlando State: FL Zip Code: 32801

FEC ID number of contributing federal political committee: C

Name of Employer: State Innovation Exchange Occupation: Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2026

Transaction ID : SA11AI.5153

Amount of Each Receipt this Period
250.00

Memo Item
Primary

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

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

1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Eskamani, Ida, , ,

Mailing Address 126 N. Mills Ave

City Orlando State FL Zip Code 32801

FEC ID number of contributing federal political committee.

Name of Employer State Innovation Exchange Occupation Senior Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2026

Transaction ID : SA11AI.6345

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Ewing, Anna, , ,

Mailing Address 4343 windergate dr

City jax State FL Zip Code 32257

FEC ID number of contributing federal political committee.

Name of Employer na Occupation Na

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : SA11AI.5646

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Ewing, Anna, , ,

Mailing Address 4343 windergate dr

City jax State FL Zip Code 32257

FEC ID number of contributing federal political committee.

Name of Employer na Occupation Na

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2026

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period

Memo Item
Primary

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Fakhoury, Manal, , ,
Mailing Address P.O. Box 4428

City Ocala State FL Zip Code 34478

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 11 / 2026

Transaction ID : SA11AI.7308

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Fakhoury, Manal, , ,
Mailing Address P.O. Box 4428

City Ocala State FL Zip Code 34478

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1050.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9396

Amount of Each Receipt this Period
50.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Falbo, Terri, , ,
Mailing Address 1038 Windswept Ct

City Ocoee State FL Zip Code 34761

FEC ID number of contributing federal political committee. C

Name of Employer CAIR Florida Occupation Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2026

Transaction ID : SA11AI.6339

Amount of Each Receipt this Period
100.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 1150.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Falbo, Terri, , ,

Mailing Address 1038 Windswept Ct

City Ocoee State FL Zip Code 34761

FEC ID number of contributing federal political committee.

Name of Employer CAIR Florida Occupation Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.6373

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Falbo, Terri, , ,

Mailing Address 1038 Windswept Ct

City Ocoee State FL Zip Code 34761

FEC ID number of contributing federal political committee.

Name of Employer CAIR Florida Occupation Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7183

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Falbo, Terri, , ,

Mailing Address 1038 Windswept Ct

City Ocoee State FL Zip Code 34761

FEC ID number of contributing federal political committee.

Name of Employer CAIR Florida Occupation Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7644

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Falbo, Terri, , ,

Mailing Address 1038 Windswept Ct

City Ocoee State FL Zip Code 34761

FEC ID number of contributing federal political committee.

Name of Employer CAIR Florida Occupation Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2026

Transaction ID : SA11AI.8874

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Farah, Ruba, , ,

Mailing Address 4436 Glen Kernan Pkwy East

City Jacksonville State FL Zip Code 32224

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2026

Transaction ID : SA11AI.7968

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Farrag, Rick, , ,

Mailing Address box 3463

City Chantilly State VA Zip Code 20151

FEC ID number of contributing federal political committee.

Name of Employer self employed Occupation Management Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 13 / 2026

Transaction ID : SA11AI.7366

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Fraser, Stuart, , ,

Mailing Address 12153 Plantation Way

City: Palm Beach Gardens State: FL Zip Code: 33418

FEC ID number of contributing federal political committee: C

Name of Employer: Not Employed Occupation: Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 25 / 2026

Transaction ID : SA11AI.5348

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Gadling-Dixon, Agnes, , ,

Mailing Address 2863 Percy Rd

City: Jacksonville State: FL Zip Code: 32218

FEC ID number of contributing federal political committee: C

Name of Employer: Not Employed Occupation: Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9846

Amount of Each Receipt this Period
100.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Gaffney, Erin, , ,

Mailing Address 201 Kathryn

City: Marietta State: GA Zip Code: 30066

FEC ID number of contributing federal political committee: C

Name of Employer: Wellstar Occupation: Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2026

Transaction ID : SA11AI.7850

Amount of Each Receipt this Period
300.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 1400.00

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 22 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Gentile, Haley, , ,

Mailing Address 4445 widegeon Way

City Tallahassee	State FL	Zip Code 32303
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Florida State University	Occupation Assistant Dean
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6102

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Glasgal, Kim, , ,

Mailing Address 11035 Riverport Dr W

City Jacksonville	State FL	Zip Code 32223
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer self	Occupation IT
--------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7171

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Goggins, Ashley, , ,

Mailing Address 6434 Teresa Ave

City Jacksonville	State FL	Zip Code 32208
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Ashley Goggins Law P.A.	Occupation Attorney
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6016

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 77
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Goggins, Ashley, , ,

Mailing Address 6434 Teresa Ave

City Jacksonville State FL Zip Code 32208

FEC ID number of contributing federal political committee. C

Name of Employer Ashley Goggins Law P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2026

Transaction ID : SA11AI.7181

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Goldwire, Ladi, , ,

Mailing Address 15972 Whippoorwill Circle

City Loxahatchee State FL Zip Code 33470

FEC ID number of contributing federal political committee. C

Name of Employer BGM Holdings Occupation General Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1020.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2026

Transaction ID : SA11AI.7125

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Green, James, , ,

Mailing Address 8460 Fort Caroline Road

City Jacksonville State FL Zip Code 32277

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4900

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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 24 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Green, James, , ,

Mailing Address 8460 Fort Caroline Road

City Jacksonville State FL Zip Code 32277

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 22 / 2026

Transaction ID : SA11AI.6390

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Green, James, , ,

Mailing Address 8460 Fort Caroline Road

City Jacksonville State FL Zip Code 32277

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2026

Transaction ID : SA11AI.7616

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Greer, Alana, , ,

Mailing Address 1428 Alegriano Ave

City Coral Gables State FL Zip Code 33146

FEC ID number of contributing federal political committee. C

Name of Employer Community Justice Project Occupation Movement Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2026

Transaction ID : SA11AI.5847

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 25 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Grice, Randy, , ,

Mailing Address 40 NW 124th ST

City North Miami State FL Zip Code 33168

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

Name of Employer Occupation
GMX Customer

Receipt For: Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 06 2026

Transaction ID : SA11AI.7073

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Guillaume, Suze, , ,

Mailing Address 400 NW 130th St

City North Miami State FL Zip Code 33014

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

Name of Employer Occupation
Miami Dade College Higher Ed Professional

Receipt For: Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 06 2026

Transaction ID : SA11AI.7075

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Gundy, Reginald, , ,

Mailing Address 2783 Armsdale Rd

City Jacksonville State FL Zip Code 32218

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

Name of Employer Occupation
JLC Consultants Self Employed

Receipt For: Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 05 2026

Transaction ID : SA11AI.5885

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Gutierrez, Valerie, , ,
Mailing Address 7650 Knoll Dr. N
City Jacksonville State FL Zip Code 32221
FEC ID number of contributing federal political committee. C
Name of Employer JEA Occupation Electrician
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date 250.00

Date of Receipt 03 / 16 / 2026
Transaction ID : SA11AI.7508
Amount of Each Receipt this Period 250.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Hamami, Zouhaier, , ,
Mailing Address 7400 103rd street
City Jacksonville State FL Zip Code 32210
FEC ID number of contributing federal political committee. C
Name of Employer Benfarah Ilc Occupation Investor
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date 3500.00

Date of Receipt 01 / 27 / 2026
Transaction ID : SA11AI.5428
Amount of Each Receipt this Period 3500.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Hardy, Omari, , ,
Mailing Address 1111 D Street SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. C
Name of Employer Seven Letter Occupation Communications
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date 250.00

Date of Receipt 03 / 13 / 2026
Transaction ID : SA11AI.7438
Amount of Each Receipt this Period 250.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 4000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Haskell, Miriam, , ,

Mailing Address 800 Lenox Ave Apt 4

City Miami Beach State FL Zip Code 33139-5621

FEC ID number of contributing federal political committee. C

Name of Employer CJP Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 30 / 2026

Transaction ID : SA11AI.5680

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Hathaway, David, , ,

Mailing Address 225 Myra St

City Neptune Beach State FL Zip Code 32266

FEC ID number of contributing federal political committee. C

Name of Employer Unemployed Occupation Activist

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 281.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : SA11AI.5636

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Hendley, Richard, , ,

Mailing Address 2032 Samontee Road

City Jacksonville State FL Zip Code 32211

FEC ID number of contributing federal political committee. C

Name of Employer JSO Occupation Law Enforcement

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2026

Transaction ID : SA11AI.9331

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 28 OF 77
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Henrichsen, Neil, , ,

Mailing Address 2815 Grand Avenue

City Jacksonville	State FL	Zip Code 32210
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5909

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Hudson, Elpagnier, , ,

Mailing Address 230 N W 2 Avenue

City Delray Beach	State FL	Zip Code 33444
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer FIU	Occupation Senior Vice President
-------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7114

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Hudson, Elpagnier, , ,

Mailing Address 230 N W 2 Avenue

City Delray Beach	State FL	Zip Code 33444
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer FIU	Occupation Senior Vice President
-------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9447

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Hunter, Chenelle, , ,

Mailing Address 807 Bent Baum Road

City Jacksonville State FL Zip Code 32205

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

Name of Employer The Doctors Management Company Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2026

Transaction ID : SA11AI.6975

Amount of Each Receipt this Period
100.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Jean-Bart, Leslie, , ,

Mailing Address 12354 Deersong Dr.

City Jacksonville State FL Zip Code 32218

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

Name of Employer Terrell Hogan Yegelwel P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2026

Transaction ID : SA11AI.7469

Amount of Each Receipt this Period
500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Jean-Bart, Leslie, , ,

Mailing Address 12354 Deersong Dr.

City Jacksonville State FL Zip Code 32218

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

Name of Employer Terrell Hogan Yegelwel P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2026

Transaction ID : SA11AI.7548

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Jean-Bart, Leslie, , ,

Mailing Address 12354 Deersong Dr.

City Jacksonville State FL Zip Code 32218

FEC ID number of contributing federal political committee.

Name of Employer Terrell Hogan Yegelwel P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.10014

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Jennings, Kristin, , ,

Mailing Address 818 Hardwood St

City Orange Park State FL Zip Code 32065

FEC ID number of contributing federal political committee.

Name of Employer Morgan & Morgan Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5778

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Jennings, Kristin, , ,

Mailing Address 818 Hardwood St

City Orange Park State FL Zip Code 32065

FEC ID number of contributing federal political committee.

Name of Employer Morgan & Morgan Occupation Paralegal

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5853

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: (check only one)		PAGE 31 OF 77	
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<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Jennings, Kristin, , ,

Mailing Address 818 Hardwood St

City Orange Park	State FL	Zip Code 32065
---------------------	-------------	-------------------

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

Name of Employer Morgan & Morgan	Occupation Paralegal
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6216

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Jennings, Kristin, , ,

Mailing Address 818 Hardwood St

City Orange Park	State FL	Zip Code 32065
---------------------	-------------	-------------------

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

Name of Employer Morgan & Morgan	Occupation Paralegal
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7091

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Jennings, Kristin, , ,

Mailing Address 818 Hardwood St

City Orange Park	State FL	Zip Code 32065
---------------------	-------------	-------------------

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

Name of Employer Morgan & Morgan	Occupation Paralegal
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7565

Amount of Each Receipt this Period

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="242.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Johnson, Stephen, , ,

Mailing Address 170 NE 159th street

City miami State FL Zip Code 33162

FEC ID number of contributing federal political committee. C

Name of Employer Lydecker LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4910

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Jones, Coyuca, , ,

Mailing Address 992 Encourte Green

City Apopka State FL Zip Code 32712

FEC ID number of contributing federal political committee. C

Name of Employer 1199SEIU Occupation Political Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2026

Transaction ID : SA11AI.5155

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Jurvetson, Karla, , ,

Mailing Address 350 2nd Street #4

City Los Altos State CA Zip Code 94022

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Psychiatrist

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 04 / 2026

Transaction ID : SA11AI.6920

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

**SCHEDULE A (FEC Form 3)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Kapitan, Rima, , ,
Mailing Address 6061 North Kostner Avenue
City Chicago State IL Zip Code 60646
FEC ID number of contributing federal political committee. C
Name of Employer Kapitan Gomaa Law Occupation Lawyer
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2026
Transaction ID : SA11AI.5493
Amount of Each Receipt this Period
500.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Keisling, Mai, , ,
Mailing Address 4918 Island Club Court
City Jacksonville State FL Zip Code 32225
FEC ID number of contributing federal political committee. C
Name of Employer Duval schools Occupation teacher
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2026
Transaction ID : SA11AI.8176
Amount of Each Receipt this Period
250.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Khaliq, Afifa, , ,
Mailing Address 4490 Camrose Ln
City West Palm Beach State FL Zip Code 33417-8222
FEC ID number of contributing federal political committee. C
Name of Employer SEIU Florida Public Services Union Occupation Chief of Staff
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2026
Transaction ID : SA11AI.7089
Amount of Each Receipt this Period
100.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Killen, Matt, , ,

Mailing Address 31 West Adams St #907

City Jacksonville State FL Zip Code 32202

FEC ID number of contributing federal political committee. C

Name of Employer Killen Media LLC Occupation Web Designer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2026

Transaction ID : SA11AI.7773

Amount of Each Receipt this Period
100.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Krantz, Adria, , ,

Mailing Address 1172 mill creek dr

City St Johns State FL Zip Code 32259

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4301

Amount of Each Receipt this Period
500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Lance Portis, Senovia, , ,

Mailing Address 6287 Devonhurst Drive

City Jacksonville State FL Zip Code 32258

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2026

Transaction ID : SA11AI.5143

Amount of Each Receipt this Period
500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00

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

**SCHEDULE A (FEC Form 3)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Lawson, Douglas, , ,
Mailing Address 25 E BLUE HERON BLVD
City RIVIERA BEACH State FL Zip Code 33404
FEC ID number of contributing federal political committee. C
Name of Employer Infinity taxes Occupation CEO
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2026
Transaction ID : SA11AI.7118
Amount of Each Receipt this Period 250.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Leeds, Millie, , ,
Mailing Address 3636 Riverside Ave Apt 4
City Jacksonville State FL Zip Code 32205
FEC ID number of contributing federal political committee. C
Name of Employer Jimerson Birr P.A. Occupation Marketing
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2026
Transaction ID : SA11AI.4916
Amount of Each Receipt this Period 250.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Long, Lisa, , ,
Mailing Address 13740 Night Hawk Ct.
City Jacksonville State FL Zip Code 32224
FEC ID number of contributing federal political committee. C
Name of Employer Garrison Ridge Occupation Producer
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2026
Transaction ID : SA11AI.7539
Amount of Each Receipt this Period 500.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 36 OF 77
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Lopez, Maria, , ,

Mailing Address 2470 NE 184th Terr

City: North miami Beach State: FL Zip Code: 33160

FEC ID number of contributing federal political committee: C

Name of Employer: Agency Occupation: Partner

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 05 / 2026

Transaction ID : SA11AI.5893

Amount of Each Receipt this Period: 100.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Lumpkin, Ardonnis, , ,

Mailing Address 7101 Cutter Court

City: Pompano Beach State: FL Zip Code: 33067

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Business Person

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 02 / 27 / 2026

Transaction ID : SA11AI.6649

Amount of Each Receipt this Period: 3500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
M, Alexis, , ,

Mailing Address 2297 Saratoga Lane

City: West Palm Beach State: FL Zip Code: 33409

FEC ID number of contributing federal political committee: C

Name of Employer: TPS Occupation: ID

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 03 / 31 / 2026

Transaction ID : SA11AI.9897

Amount of Each Receipt this Period: 3500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 7100.00

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

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

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

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Massis, Maher, , ,

Mailing Address 13582 Big Boulder Rd

City Herndon State VA Zip Code 20171

FEC ID number of contributing federal political committee. C

Name of Employer Century 21 Occupation Real estate

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2026

Transaction ID : SA11AI.8029

Amount of Each Receipt this Period
500.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Matlow, Jeremy, , ,

Mailing Address 170 Meridianna dr

City Tallahassee State FL Zip Code 32312

FEC ID number of contributing federal political committee. C

Name of Employer City of Tallahassee Occupation City commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2026

Transaction ID : SA11AI.6332

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Maule, William, , ,

Mailing Address 14549 Christen Dr

City Jacksonville State FL Zip Code 32218

FEC ID number of contributing federal political committee. C

Name of Employer IRS Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
202.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2026

Transaction ID : SA11AI.5509

Amount of Each Receipt this Period
150.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
May, Kelsey, , ,

Mailing Address PO Box 9

City St Augustine State FL Zip Code 32085

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

Name of Employer Self Occupation Bookkeeper

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : SA11AI.5585

Amount of Each Receipt this Period
450.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Mcdaniel, Tara, , ,

Mailing Address 20070 Doolittle Street

City Gaithersburg State MD Zip Code 20886

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

Name of Employer Maryland Aviation Administration Occupation Chief of External and Legislative Affa

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2026

Transaction ID : SA11AI.7695

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Mcminn, Jineane, , ,

Mailing Address 907 Rio Lindo Dr

City Jacksonville State FL Zip Code 32207

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

Name of Employer Miller Hahn PLLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 27 / 2026

Transaction ID : SA11AI.8319

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00

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 39 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Mercado, Andrea, , ,

Mailing Address 1104 waterbrook lane

City Weston	State FL	Zip Code 33326
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer New Florida Majority	Occupation Executive Director
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Mercado, Andrea, , ,

Mailing Address 1104 waterbrook lane

City Weston	State FL	Zip Code 33326
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer New Florida Majority	Occupation Executive Director
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9851

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Merchant, Riaz, , ,

Mailing Address 20217 sw 54th place 1534

City PEMBROKE PINES	State FL	Zip Code 33332
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Mertech	Occupation Director
-----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7132

Amount of Each Receipt this Period

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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 40 OF 77	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Merten, Ila Rae, , ,

Mailing Address 2804 Post Street

City Jacksonville	State FL	Zip Code 32205
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer self	Occupation self-employed.
--------------------------	------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="250.00"/>
---	---

Date of Receipt
 / /

Transaction ID : SA11AI.6047

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Merten, Ila Rae, , ,

Mailing Address 2804 Post Street

City Jacksonville	State FL	Zip Code 32205
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer self	Occupation self-employed.
--------------------------	------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="350.00"/>
---	---

Date of Receipt
 / /

Transaction ID : SA11AI.7126

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Merten, Ila Rae, , ,

Mailing Address 2804 Post Street

City Jacksonville	State FL	Zip Code 32205
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer self	Occupation self-employed.
--------------------------	------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="400.00"/>
---	---

Date of Receipt
 / /

Transaction ID : SA11AI.7328

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Merten, Ilarae, , ,

Mailing Address 2804 Post St

City Jacksonville State FL Zip Code 32205

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2026

Transaction ID : SA11AI.9069

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Middleton, Willie, , ,

Mailing Address 12701 ASTOR PL

City FORT MYERS State FL Zip Code 33913

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2026

Transaction ID : SA11AI.7141

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Minion, James, , ,

Mailing Address 2525 Forbes Street

City Jacksonville State FL Zip Code 32204

FEC ID number of contributing federal political committee.

Name of Employer Farm Out Design Services LLC Occupation Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 16 / 2026

Transaction ID : SA11AI.7504

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Montgomery, Ingrid, , ,

Mailing Address 11783 Alexandra Drive

City Jacksonville State FL Zip Code 32218

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 208.78

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2026

Transaction ID : SA11AI.7686

Amount of Each Receipt this Period
10.26

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Montgomery, Ingrid, , ,

Mailing Address 11783 Alexandra Drive

City Jacksonville State FL Zip Code 32218

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 334.96

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9861

Amount of Each Receipt this Period
126.18

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Morales, Melissa, , ,

Mailing Address 14413 Stearns St

City Overland Park State KS Zip Code 66221

FEC ID number of contributing federal political committee. C

Name of Employer Civix Strategy Group Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4349

Amount of Each Receipt this Period
500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 636.44

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 43 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Mudd, Carol, , ,

Mailing Address 1049 Natures Hammock Rd S

City St Johns	State FL	Zip Code 32259
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7645

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Mudd, Carol, , ,

Mailing Address 1049 Natures Hammock Rd S

City St Johns	State FL	Zip Code 32259
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7667

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Munroe, Barry, , ,

Mailing Address 1248 Halifax Court

City Tallahassee	State FL	Zip Code 32308
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7195

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 44 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Navarro, Stephanie, , ,

Mailing Address 3163 East Amber Ridge Way

City Phoenix	State AZ	Zip Code 85048
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Trumpet	Occupation Customer Success Manager
-----------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4160

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Nelson, Roxey, , ,

Mailing Address 600 63rd St. N

City St. Petersburg	State FL	Zip Code 33710
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer SEIU	Occupation Organizer
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.4237

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Nelson, Roxey, , ,

Mailing Address 600 63rd St. N

City St. Petersburg	State FL	Zip Code 33710
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer SEIU	Occupation Organizer
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.10008

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Nevel, Donna, , ,

Mailing Address 910 Bay Drive Apt 33

City Miami Beach	State FL	Zip Code 33141
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer PARCEO	Occupation Educator
----------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5887

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Nixon, Earline, , ,

Mailing Address 5571 N Longspur Ave

City Jacksonville	State FL	Zip Code 32219
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6677

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Nixon, Earline, , ,

Mailing Address 5571 N Longspur Ave

City Jacksonville	State FL	Zip Code 32219
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7165

Amount of Each Receipt this Period

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="317.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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 46 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Nixon, Earline, , ,

Mailing Address 5571 N Longspur Ave

City Jacksonville	State FL	Zip Code 32219
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7563

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Nixon, Earline, , ,

Mailing Address 5571 N Longspur Ave

City Jacksonville	State FL	Zip Code 32219
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9221

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Nixon, Earline, , ,

Mailing Address 5571 N Longspur Ave

City Jacksonville	State FL	Zip Code 32219
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9969

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 47 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Noden, Kirk, , ,

Mailing Address 425 Cherry Street 2nd Floor

City Kent	State OH	Zip Code 44240
--------------	-------------	-------------------

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

Name of Employer CBS	Occupation Consultant
-------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2026

Transaction ID : SA11AI.5119

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Onasanya, Bandele, , ,

Mailing Address 3759 Riveredge Dr

City Jacksonville	State DE	Zip Code 32277
----------------------	-------------	-------------------

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

Name of Employer Onas Corporation	Occupation Engineer
--------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 27 / 2026

Transaction ID : SA11AI.5418

Amount of Each Receipt this Period
3500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Ortiz, Eunic, , ,

Mailing Address 1155 23rd Ave N

City St. Petersburg	State FL	Zip Code 33704
------------------------	-------------	-------------------

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

Name of Employer Self	Occupation Communications
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2026

Transaction ID : SA11AI.4223

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	4750.00
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 48 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Pennington, Justin, , ,

Mailing Address 70 Spring Tide Way

City Ponte Vedra	State FL	Zip Code 32081
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Infraxio	Occupation Consultant
------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9315

Amount of Each Receipt this Period

Memo Item
 Primary

B. Full Name (Last, First, Middle Initial)
Petit, Tessa, , ,

Mailing Address 210 174th St Apt 1819

City Sunny Isles Beach	State FL	Zip Code 33160-3343
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer FLIC	Occupation ED
--------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.8414

Amount of Each Receipt this Period

Memo Item
 Primary

C. Full Name (Last, First, Middle Initial)
Pollock, Mincy, , ,

Mailing Address 12518 Woodfield Circle West

City Jacksonville	State FL	Zip Code 32258
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer POLLOCK GROUP	Occupation Self employed
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9290

Amount of Each Receipt this Period

Memo Item
 Primary

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="2000.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 77
(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)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Pollock, Sonte, , ,

Mailing Address 12518 Woodfield Circle West

City Jacksonville	State FL	Zip Code 32258
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Your Peaceful Place	Occupation Therapist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9289

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Porta, Stephanie, , ,

Mailing Address 3041 Pine Grove Road

City Berkeley Springs	State WV	Zip Code 25411
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer community labor	Occupation non-profit director
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7867

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Porta, Stephanie, , ,

Mailing Address 3041 Pine Grove Road

City Berkeley Springs	State WV	Zip Code 25411
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer community labor	Occupation non-profit director
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9850

Amount of Each Receipt this Period

Memo Item
Primary

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

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

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

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

FOR LINE NUMBER: PAGE 50 OF 77
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Rae, David, , ,
Mailing Address 7750 Okeechobee Blvd #4-443
City West Palm Beach State FL Zip Code 33401
FEC ID number of contributing federal political committee. C
Name of Employer David Rae Occupation Dee Rae
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2026
Transaction ID : SA11AI.6451
Amount of Each Receipt this Period
250.00
 Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Remy, Guerdy, , ,
Mailing Address 630 Cranes Way
City Altamonte Springs State FL Zip Code 32701
FEC ID number of contributing federal political committee. C
Name of Employer CareerStaff Unlimited Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2026
Transaction ID : SA11AI.5940
Amount of Each Receipt this Period
500.00
 Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Remy, Guerdy, , ,
Mailing Address 630 Cranes Way
City Altamonte Springs State FL Zip Code 32701
FEC ID number of contributing federal political committee. C
Name of Employer CareerStaff Unlimited Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2026
Transaction ID : SA11AI.6320
Amount of Each Receipt this Period
500.00
 Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
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 51 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Remy, Guerdy, , ,

Mailing Address 630 Cranes Way

City Altamonte Springs State FL Zip Code 32701

FEC ID number of contributing federal political committee.

Name of Employer CareerStaff Unlimited Occupation Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6340

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Remy, Guerdy, , ,

Mailing Address 630 Cranes Way

City Altamonte Springs State FL Zip Code 32701

FEC ID number of contributing federal political committee.

Name of Employer CareerStaff Unlimited Occupation Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7559

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Remy, Guerdy, , ,

Mailing Address 630 Cranes Way

City Altamonte Springs State FL Zip Code 32701

FEC ID number of contributing federal political committee.

Name of Employer CareerStaff Unlimited Occupation Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7560

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Richardson, Carol, , ,

Mailing Address 14631 SW 103rd Pl

City Miami State FL Zip Code 33176

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9362

Amount of Each Receipt this Period
25.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Ridley, Charles, , ,

Mailing Address 210 North West Second Ave

City Delray Beach State FL Zip Code 33444

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

Name of Employer FPSU Occupation Organizer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 07 / 2026

Transaction ID : SA11AI.7112

Amount of Each Receipt this Period
500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Rodriguez, Marialegría, , ,

Mailing Address 910 bay drive #13

City miami beach State FL Zip Code 33141

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

Name of Employer Florida Immigrant Coalition (FLIC) Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2026

Transaction ID : SA11AI.5897

Amount of Each Receipt this Period
3500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 4025.00

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 53 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Rodriguez, Marialegria, , ,

Mailing Address 910 bay drive #13

City: miami beach State: FL Zip Code: 33141

FEC ID number of contributing federal political committee: C

Name of Employer: Florida Immigrant Coalition (FLIC) Occupation: Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9391

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Rodriguez, Marialegria, , ,

Mailing Address 910 bay drive #13

City: miami beach State: FL Zip Code: 33141

FEC ID number of contributing federal political committee: C

Name of Employer: Florida Immigrant Coalition (FLIC) Occupation: Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9392

Amount of Each Receipt this Period
2500.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Rogers, Leslie, , ,

Mailing Address 3711 Aster Dr

City: Sarasota State: FL Zip Code: 34233

FEC ID number of contributing federal political committee: C

Name of Employer: Resolution Life Occupation: Project manager

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2026

Transaction ID : SA11AI.8057

Amount of Each Receipt this Period
500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00

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 54 OF 77
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Rolle, Sheena, , ,

Mailing Address 608 18th Street

City Orlando State FL Zip Code 32805

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

Name of Employer State Voices Occupation Florida Director

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 26 / 2026

Transaction ID : SA11AI.8090

Amount of Each Receipt this Period
200.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Rouse, Big Sister, , ,

Mailing Address 3838 Painted Bunting Way

City Jacksonville State FL Zip Code 32224

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

Name of Employer Teal Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period
280.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Sheikh, Anita, , ,

Mailing Address 9780 Calculus Ct

City Jacksonville State FL Zip Code 32256

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

Name of Employer DCPS Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2026

Transaction ID : SA11AI.6193

Amount of Each Receipt this Period
300.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 780.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Sherman, Lynn, , ,

Mailing Address 12519 Lake Taylor Ln

City Jacksonville State FL Zip Code 32218

FEC ID number of contributing federal political committee. C

Name of Employer City of Jacksonville Occupation Healthcare

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2026

Transaction ID : SA11AI.7786

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Siddiqi, Siraj, , ,

Mailing Address 2218 W Kenfield Ct

City Peoria State IL Zip Code 61615

FEC ID number of contributing federal political committee. C

Name of Employer University of IL Occupation teacher

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 23 / 2026

Transaction ID : SA11AI.6435

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Siddiqui, Saima, , ,

Mailing Address 16326 Heathrow Drive

City Tampa State FL Zip Code 34647

FEC ID number of contributing federal political committee. C

Name of Employer PwC LLP Occupation Risk Management

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 08 / 2026

Transaction ID : SA11AI.7139

Amount of Each Receipt this Period
480.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1730.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Smith, Andre, , ,

Mailing Address 806 J.R. Arnold Court

City Panama City Beach State FL Zip Code 32407

FEC ID number of contributing federal political committee.

Name of Employer Bay Arthritis Institute Occupation Operations Officer

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2026

Transaction ID : SA11AI.6454

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Smith, Warren, , ,

Mailing Address 5618 Swamp Fox Rd

City Jacksonville State FL Zip Code 32210

FEC ID number of contributing federal political committee.

Name of Employer ILA 1408 Occupation Longshoreman

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 23 / 2026

Transaction ID : SA11AI.5004

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Snow, William, , ,

Mailing Address 13912 Ashgrove Cir

City Parker State CO Zip Code 80134

FEC ID number of contributing federal political committee.

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2026

Transaction ID : SA11AI.9172

Amount of Each Receipt this Period

Memo Item
Primary

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

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

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

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

FOR LINE NUMBER: PAGE 57 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Spann, Barney, , ,

Mailing Address 153 West 6th Street

City BALDWIN State FL Zip Code 32206

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2026

Transaction ID : SA11AI.6349

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Spencer, Charles, , ,

Mailing Address 590 queens harbor blvd.

City Jacksonville State FL Zip Code 32225

FEC ID number of contributing federal political committee. C

Name of Employer ILA South Atlantic & Gulf Coast Distri Occupation Union official

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2026

Transaction ID : SA11AI.5362

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Stanberry, Charlyn, , ,

Mailing Address 738 Burns St SE

City Washington State DC Zip Code 20019

FEC ID number of contributing federal political committee. C

Name of Employer NAB Occupation VP Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : SA11AI.9979

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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 58 OF 77	
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial) Stiefel, Barbara, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 23 / 2026		
Mailing Address P.O. Box 141128			Transaction ID : SA11AI.5056		
City Coral Gables	State FL	Zip Code 33114	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Primary		
Name of Employer Not employed		Occupation Not employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00			

Full Name (Last, First, Middle Initial) Stokes, Autumn, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 03 / 2026		
Mailing Address 1100 Chiquita Boulevard North			Transaction ID : SA11AI.4114		
City Cape Coral	State FL	Zip Code 33993	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Primary		
Name of Employer Islandside and Loving Paws Animal Hosp		Occupation Owner of 2 Vet Clinics			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) Stokes, Autumn, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 22 / 2026		
Mailing Address 4860 Preserve Blvd			Transaction ID : SA11AI.4749		
City Saint Cloud	State FL	Zip Code 34772	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Primary		
Name of Employer Animal Specialty and Emergency Hospita		Occupation Veterinary Technician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)..... ▶	3750.00
TOTAL This Period (last page this line number only)..... ▶	3750.00

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 59 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5656

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5850

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.5964

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 60 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

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

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2026

Transaction ID : SA11AI.6097

Amount of Each Receipt this Period
500.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

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

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 25 / 2026

Transaction ID : SA11AI.6483

Amount of Each Receipt this Period
200.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

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

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2026

Transaction ID : SA11AI.6687

Amount of Each Receipt this Period
300.00

Memo Item
Primary

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

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

1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: (check only one)		PAGE 61 OF 77	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6741

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7533

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7708

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 62 OF 77	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.8158

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9162

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Stokes, Autumn, , ,

Mailing Address 1100 Chiquita Boulevard North

City Cape Coral	State FL	Zip Code 33993
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Islandside and Loving Paws Animal Hosp	Occupation Owner of 2 Vet Clinics
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.9774

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Taylor, Bruce, , ,

Mailing Address 5967 Long Cove Dr

City Jacksonville State FL Zip Code 32222-1397

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 28 2026

Transaction ID : SA11AI.5453

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Taylor, Bruce, , ,

Mailing Address 5967 Long Cove Dr

City Jacksonville State FL Zip Code 32222-1397

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 24 2026

Transaction ID : SA11AI.6455

Amount of Each Receipt this Period
100.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Taylor, Bruce, , ,

Mailing Address 5967 Long Cove Dr

City Jacksonville State FL Zip Code 32222-1397

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 29 2026

Transaction ID : SA11AI.9078

Amount of Each Receipt this Period
100.00

Memo Item
Primary

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

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

1200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Thomas, Rhonda, , ,

Mailing Address 5384 SW 159th Ave

City: Hollywood State: FL Zip Code: 33027

FEC ID number of contributing federal political committee: C

Name of Employer: New Generation Occupation: Clergy

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 28 / 2026

Transaction ID : SA11AI.8529

Amount of Each Receipt this Period: 250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Toffie, Quanita, , ,

Mailing Address 126 NW 99th St

City: Miami Shores State: FL Zip Code: 33150

FEC ID number of contributing federal political committee: C

Name of Employer: AAPI Fund Occupation: Nonprofit worker

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 350.00

Date of Receipt: 02 / 05 / 2026

Transaction ID : SA11AI.5875

Amount of Each Receipt this Period: 250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Toffie, Quanita, , ,

Mailing Address 126 NW 99th St

City: Miami Shores State: FL Zip Code: 33150

FEC ID number of contributing federal political committee: C

Name of Employer: AAPI Fund Occupation: Nonprofit worker

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 375.00

Date of Receipt: 02 / 24 / 2026

Transaction ID : SA11AI.6443

Amount of Each Receipt this Period: 25.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional) ▶ 525.00

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 65 OF 77	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Toffie, Quanita, , ,

Mailing Address 126 NW 99th St

City Miami Shores	State FL	Zip Code 33150
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer AAPI Fund	Occupation Nonprofit worker
-------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.7637

Amount of Each Receipt this Period

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Touchton, Ava, , ,

Mailing Address 3592 Waterchase Way E

City Jacksonville	State FL	Zip Code 32224
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Not Employed	Occupation Not Employed
----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6035

Amount of Each Receipt this Period

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Touchton, Chris, , ,

Mailing Address 3592 Waterchase Way East

City Jacksonville	State FL	Zip Code 32224
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer Nearmap	Occupation Executive
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.6063

Amount of Each Receipt this Period

Memo Item
Primary

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Touchton, Noah, , ,

Mailing Address 3592 Waterchase Way East

City Jacksonville State FL Zip Code 32224

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 11 / 2026

Transaction ID : SA11AI.6031

Amount of Each Receipt this Period
7000.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Trager, Denise, , ,

Mailing Address 9273 River Shores Lane

City Jacksonville State FL Zip Code 32257

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 19 / 2026

Transaction ID : SA11AI.6224

Amount of Each Receipt this Period
1000.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Warthen, Cassandra, , ,

Mailing Address 1359 Evergreen Ave

City Jacksonville State FL Zip Code 32206

FEC ID number of contributing federal political committee. C

Name of Employer United Airlines Occupation Flight Attendant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2026

Transaction ID : SA11AI.7688

Amount of Each Receipt this Period
100.00

Memo Item
Primary

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

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

8100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Watts, Craig, , ,

Mailing Address 5249 Cattle Crossing Way

City Jacksonville State FL Zip Code 32226

FEC ID number of contributing federal political committee. C

Name of Employer Teradata Occupation Solution Architect

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2026

Transaction ID : SA11AI.6793

Amount of Each Receipt this Period
500.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Williams, Rosemary, , ,

Mailing Address 1455 Florida Ave

City Jacksonville State FL Zip Code 32206-4714

FEC ID number of contributing federal political committee. C

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2026

Transaction ID : SA11AI.7650

Amount of Each Receipt this Period
20.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Willie, Darryl, , ,

Mailing Address 915 North Woodbrige Hollow Rd

City Jacksonville State FL Zip Code 32218

FEC ID number of contributing federal political committee. C

Name of Employer Building IP Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2026

Transaction ID : SA11AI.5511

Amount of Each Receipt this Period
250.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 770.00

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 68 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Wright, Dania, , ,
Mailing Address 1954 Childress Dr SW

City Atlanta State GA Zip Code 30311

FEC ID number of contributing federal political committee. C

Name of Employer Pathward Occupation Corporate Comms Manager

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 29 / 2026

Transaction ID : SA11AI.5580

Amount of Each Receipt this Period
250.00

Memo Item
Primary

B. Full Name (Last, First, Middle Initial)
Yavari, Azadeh, , ,
Mailing Address 4422 Landover Dr

City Jacksonville State FL Zip Code 32207

FEC ID number of contributing federal political committee. C

Name of Employer Hendricks Dental Studio Occupation Dentist

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 21 / 2026

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period
250.00

Memo Item
Primary

C. Full Name (Last, First, Middle Initial)
Yeager, Baile, , ,
Mailing Address 5903 Stoneler Rd

City Tallahassee State FL Zip Code 32303

FEC ID number of contributing federal political committee. C

Name of Employer All star auto lights Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2026

Transaction ID : SA11AI.6856

Amount of Each Receipt this Period
500.00

Memo Item
Primary

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 69 OF 77
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANGIE FOR FLORIDA

A. Full Name (Last, First, Middle Initial)
Young, Isaiah, , ,

Mailing Address 9059 Hawkeye dr

City Jacksonville State FL Zip Code 32221

FEC ID number of contributing federal political committee. C

Name of Employer Ila 1408 Occupation Longshoreman

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2026

Transaction ID : SA11AI.9321

Amount of Each Receipt this Period
500.00

Memo Item
Primary

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).....▶	500.00
TOTAL This Period (last page this line number only).....▶	116962.07

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 70 OF 77			
	<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)
ANGIE FOR FLORIDA

A. AMAZON Market Place

Full Name (Last, First, Middle Initial)

Mailing Address 1770 Crystal Drive

City Arlington State VA Zip Code 22202

Purpose of Disbursement Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 19 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 418.95

Transaction ID : SB17.10056

Memo Item

B. AMAZON Market Place

Full Name (Last, First, Middle Initial)

Mailing Address 1770 Crystal Drive

City Arlington State VA Zip Code 22202

Purpose of Disbursement Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 21 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 5.94

Transaction ID : SB17.10062

Memo Item

C. AMAZON Market Place

Full Name (Last, First, Middle Initial)

Mailing Address 1770 Crystal Drive

City Arlington State VA Zip Code 22202

Purpose of Disbursement Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 26.35

Transaction ID : SB17.10064

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 451.24

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 71 OF 77			
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial) A. AMAZON Market Place		Date of Disbursement MM / DD / YYYY 01 / 24 / 2026
Mailing Address 1770 Crystal Drive		FEC Identification Number C
City Arlington	State VA	Zip Code 22202
Purpose of Disbursement Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 52.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10065
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMAZON Market Place		Date of Disbursement MM / DD / YYYY 02 / 23 / 2026
Mailing Address 1770 Crystal Drive		FEC Identification Number C
City Arlington	State VA	Zip Code 22202
Purpose of Disbursement Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 32.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10106
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 10 / 2026
Mailing Address 1 Skyview Drive		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement Travel-Airfare	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 636.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10131
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	722.74
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 72 OF 77	
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial) A. AVIS Car Rental		Date of Disbursement MM / DD / YYYY 02 / 24 / 2026
Mailing Address 400 Yankee Clipper Dr		FEC Identification Number C
City Jacksonville	State FL	Zip Code 32218
Purpose of Disbursement Travel-Car Rental	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 687.66	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10109
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement MM / DD / YYYY 01 / 21 / 2026
Mailing Address 1400 Apalachee Pkwy		FEC Identification Number C
City Tallahassee	State FL	Zip Code 32301
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2023.13	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10061
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Charlene's Bar & Grille		Date of Disbursement MM / DD / YYYY 03 / 25 / 2026
Mailing Address 2618 Georgia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Meals	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10158
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3110.79
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 77			
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial) A. Charlene's Bar & Grille		Date of Disbursement MM / DD / YYYY 03 / 27 / 2026
Mailing Address 2618 Georgia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Meals	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 448.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10164
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CHEF SHONARI SERVICES LLC		Date of Disbursement MM / DD / YYYY 02 / 20 / 2026
Mailing Address 7519 Stidham Drive		FEC Identification Number C
City Orlando	State FL	Zip Code 32818
Purpose of Disbursement Meals	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10102
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Empower Project		Date of Disbursement MM / DD / YYYY 03 / 25 / 2026
Mailing Address 2800 Royal Ave, Suite 204		FEC Identification Number C
City Madison	State WI	Zip Code 53717
Purpose of Disbursement Database Services	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10161
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1048.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 77			
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial) A. Fraiser		Date of Disbursement MM / DD / YYYY 03 / 27 / 2026
Mailing Address PO Box 856719		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55485
Purpose of Disbursement Database Services		Amount of Each Disbursement this Period 655.98
Candidate Name		Transaction ID : SB17.10166
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Fraiser		Date of Disbursement MM / DD / YYYY 03 / 28 / 2026
Mailing Address PO Box 856719		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55485
Purpose of Disbursement Database Services		Amount of Each Disbursement this Period 655.98
Candidate Name		Transaction ID : SB17.10169
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Harris & Go LLC		Date of Disbursement MM / DD / YYYY 01 / 25 / 2026
Mailing Address 2405 Ormsby Cir W		FEC Identification Number C
City Jacksonville	State FL	Zip Code 32210
Purpose of Disbursement		Amount of Each Disbursement this Period 3038.72
Candidate Name		Transaction ID : SB17.10067
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4350.68
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 75 OF 77			
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. IRC Protection			M M / D D / Y Y Y Y 01 / 31 / 2026	
Mailing Address 4166 San Juan Ave			FEC Identification Number	
City Jacksonville	State FL	Zip Code 32210	C	
Purpose of Disbursement Security			Amount of Each Disbursement this Period	
Candidate Name			880.00	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10079	
State:	District:		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)			Date of Disbursement	
B. LANGUAGESPEAK			M M / D D / Y Y Y Y 03 / 13 / 2026	
Mailing Address 7700 West Camino Real, Ste 310,			FEC Identification Number	
City Boca Raton	State FL	Zip Code 33433	C	
Purpose of Disbursement Language Application Services			Amount of Each Disbursement this Period	
Candidate Name			575.00	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10135	
State:	District:		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. Metamorphvic			M M / D D / Y Y Y Y 01 / 25 / 2026	
Mailing Address 700 E Union St			FEC Identification Number	
City Jacksonville	State FL	Zip Code 32206	C	
Purpose of Disbursement Graphic Design			Amount of Each Disbursement this Period	
Candidate Name			212.00	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10069	
State:	District:		<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1667.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 77			
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. OneJax Promo		M M / D D / Y Y Y Y 01 / 17 / 2026	
Mailing Address 100 Festival Park Ave		FEC Identification Number	
City Jacksonville	State FL	Zip Code 32202	C
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		425.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.10052	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: _____	District: _____		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. OneJax Promo		M M / D D / Y Y Y Y 01 / 23 / 2026	
Mailing Address 100 Festival Park Ave		FEC Identification Number	
City Jacksonville	State FL	Zip Code 32202	C
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		479.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.10063	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: _____	District: _____		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Rice Mediterranean Kitchen Catering		M M / D D / Y Y Y Y 02 / 06 / 2026	
Mailing Address 2500 Biscayne Blvd		FEC Identification Number	
City Miami	State FL	Zip Code 33137	C
Purpose of Disbursement Meals		Amount of Each Disbursement this Period	
Candidate Name		525.27	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Transaction ID : SB17.10089	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	1429.27
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 77	
	<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)
ANGIE FOR FLORIDA

Full Name (Last, First, Middle Initial) A. SWITCH BOARD PBC		Date of Disbursement MM / DD / YYYY 03 / 04 / 2026
Mailing Address PO Box 33485		FEC Identification Number C
City Washington	State DC	Zip Code 20033
Purpose of Disbursement Texting Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 245.48	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10120
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SWITCH BOARD PBC		Date of Disbursement MM / DD / YYYY 03 / 04 / 2026
Mailing Address PO Box 33485		FEC Identification Number C
City Washington	State DC	Zip Code 20033
Purpose of Disbursement Texting Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 155.77	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10121
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SWITCH BOARD PBC		Date of Disbursement MM / DD / YYYY 03 / 07 / 2026
Mailing Address PO Box 33485		FEC Identification Number C
City Washington	State DC	Zip Code 20033
Purpose of Disbursement Texting Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2814.23	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.10127
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3215.48
TOTAL This Period (last page this line number only).....▶	15995.20