

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**CURBELO VICTORY COMMITTEE**

ADDRESS (number and street) **824 S Milledge Ave Ste 101**  
Check if different than previously reported. (ACC) **Athens GA 30605**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00565374** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on **11 / 06 / 2018** in the State of **FL**  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period **10 / 01 / 2018** through **10 / 17 / 2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer **KILGORE, PAUL, , ,**

Signature of Treasurer **KILGORE, PAUL, , ,** [Electronically Filed] Date **10 / 25 / 2018**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**CURBELO VICTORY COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		11494.11
(b) Cash on Hand at Beginning of Reporting Period.....	1500.01	
(c) Total Receipts (from Line 19) .....	79700.00	511000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	81200.01	522494.11
7. Total Disbursements (from Line 31).....	79700.00	520994.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1500.01	1500.01
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**CURBELO VICTORY COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	79700.00	484600.00
(ii) Unitemized .....	0.00	10400.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	79700.00	495000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	16000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	79700.00	511000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	79700.00	511000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	79700.00	511000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2013.90	37872.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2013.90	37872.93
22. Transfers to Affiliated/Other Party Committees.....	77686.10	472721.17
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	10400.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	10400.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	79700.00	520994.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79700.00	520994.10

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	79700.00	511000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	79700.00	500600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2013.90	37872.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2013.90	37872.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Alvarez, Cesar, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 333 SE 2nd Ave 44th Fl  
 City Miami State FL Zip Code 33131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Greenberg Traurig Occupation (for Individual) Co-Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 17 / 2018  
**Transaction ID : SA11AI.5110**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Argiz, Antonio, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 395 Casuarina Concourse  
 City Coral Gables State FL Zip Code 33143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MBAF Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : SA11AI.5090**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C. Ballard, Brian, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 835 SW 113th Ter  
 City Miami State FL Zip Code 32301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.5107**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Braman, Norman, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2060 Biscayne Blvd  
 City Miami State FL Zip Code 33137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Braman Management Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : SA11AI.5091**  
 Amount of Each Receipt this Period 7700.00  
 Memo Item

**B. Caballero, Nestor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4649 Ponce De Leon Blvd  
 City Coral Gables State FL Zip Code 33146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : SA11AI.5095**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Charur, Anne Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 835 SW 113th Ter  
 City Miami State FL Zip Code 33156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.5105**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Charur, Elias, , , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9155 S Dadeland Blvd

City Miami	State FL	Zip Code 33156
---------------	-------------	-------------------

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

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2018

**Transaction ID : SA11AI.5101**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Copeland, Gerret, , , Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PMB 361 Washington Blvd

City Sarasota	State FL	Zip Code 34236
------------------	-------------	-------------------

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

Name of Employer (for Individual) Terreg Management	Occupation (for Individual) Real Estate Management
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : SA11AI.5097**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. Dambra, Thomas, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4290 Filer Cove Road

City Big Torch Key	State FL	Zip Code 33042
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2018

**Transaction ID : SA11AI.5081**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Farah, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7345 Gleneagle Drive  
 City Miami Lakes State FL Zip Code 33014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Capital Market Financial Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 08 / 2018  
**Transaction ID : SA11AI.5085**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. Frisch, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 Beach Ave  
 City Atlantic Beach State FL Zip Code 32233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Beaver Fisheries Occupation (for Individual) EVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 08 / 2018  
**Transaction ID : SA11AI.5083**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Leon, Benjamin, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9100 Arvida Dr  
 City Coral Gables State FL Zip Code 33156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leon Medical Centers Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 10 / 04 / 2018  
**Transaction ID : SA11AI.5072**  
 Amount of Each Receipt this Period 2300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 20
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Leon, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9100 Arvida Drive  
 City Coral Gables State FL Zip Code 33156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LEon Medical Centers Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 04 / 2018  
**Transaction ID : SA11AI.5073**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. Leyva, Christina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Rosales Ct  
 City Coral Gables State FL Zip Code 33143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Garcia & Garcia Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5400.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.5098**  
 Amount of Each Receipt this Period 5400.00  
 Memo Item

**C. Lopez-Cantera, Amada, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2300 Coral Way Ste 201  
 City Miami State FL Zip Code 33145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.5103**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Manuel, Niebla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 888 Douglas Road  
 City Coral Gables State FL Zip Code 33134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sunwise Properties Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 05 / 2018  
**Transaction ID : SA11AI.5077**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Maury, Albert, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11501 SW 40th St  
 City Miami State FL Zip Code 33165  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leon Medical Centers Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 10 / 05 / 2018  
**Transaction ID : SA11AI.5079**  
 Amount of Each Receipt this Period 2300.00  
 Memo Item

**C. Maury, Silvia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11501 SW 40th St  
 City Miami State FL Zip Code 33165  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 05 / 2018  
**Transaction ID : SA11AI.5080**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Mendiola, Ruben, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO box 566300

City Miami	State FL	Zip Code 33256
---------------	-------------	-------------------

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

Name of Employer (for Individual) Dealernfa Inc	Occupation (for Individual) President
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2018

**Transaction ID : SA11AI.5075**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Milton, Nilda, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3211 Ponce De Leon Blvd

City Coral Gables	State FL	Zip Code 33134
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2018

**Transaction ID : SA11AI.5093**

Amount of Each Receipt this Period  
7700.00

Memo Item

**C. Milton, Nilda, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3211 Ponce De Leon Blvd

City Coral Gables	State FL	Zip Code 33134
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Information Requested	Occupation (for Individual) Information Requested
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
13100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2018

**Transaction ID : SA11AI.5109**

Amount of Each Receipt this Period  
5400.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Namoff, Robert, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9440 SW 140th St  
 City Miami State FL Zip Code 33176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Allied Universal Corp Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 11 / 2018  
**Transaction ID : SA11AI.5089**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. Pina, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15500 New Barn Road, Ste 104  
 City Miami Lakes State FL Zip Code 33014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : SA11AI.5064**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Ponce, Anolan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 188 Isla Dorada Boulevard  
 City Coral Gables State FL Zip Code 33143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fam Warehouse Corp Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : SA11AI.5066**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. Stern, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 450 Fort Hill Road  
 City Scarsdale State NY Zip Code 10583  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 03 / 2018  
**Transaction ID : SA11AI.5070**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**B. Valdez, Orlando, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9551 Banyan Drive  
 City Coral Gables State FL Zip Code 33156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Shell Lumber Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 02 / 2018  
**Transaction ID : SA11AI.5068**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Zedan, Roxana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5020 SW 72nd Ave  
 City Miami State FL Zip Code 33155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : SA11AI.5099**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Zoley, George, , ,

Mailing Address 1515 Fan Palm Rd

City Boca Raton	State FL	Zip Code 33432
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) the Geo Group	Occupation (for Individual) Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		11		2018

**Transaction ID : SA11AI.5087**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	79700.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5112

Amount of Each Disbursement this Period

78.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5113

Amount of Each Disbursement this Period

144.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5114

Amount of Each Disbursement this Period

105.60

Memo Item

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

328.80

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5115**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5116**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5117**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.5118**  
Amount of Each Disbursement this Period  
117.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.5119**  
Amount of Each Disbursement this Period  
78.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.5120**  
Amount of Each Disbursement this Period  
210.90

Memo Item

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

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

406.80

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC CC Transaction Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2018

FEC Identification Number

C [ ]

Transaction ID : SB21B.5121

Amount of Each Disbursement this Period

[ ] 19.80 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. Professional Data Services, Inc.**

Mailing Address 824 S. Milledge Ave Ste 101

City Athens State GA Zip Code 30605

Purpose of Disbursement  
JFC Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2018

FEC Identification Number

C [ ]

Transaction ID : SB21B.5122

Amount of Each Disbursement this Period

[ ] 750.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ] [ ]

Memo Item

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

[ ] 769.80 [ ]

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

[ ] 2013.90 [ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CURBELO VICTORY COMMITTEE**

**A. CARLOS CURBELO CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 8724 SUNSET DRIVE #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement  
Transfer of Net JFC Funds

Candidate Name  
**CURBELO, CARLOS, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: FL District: 26

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB22.5123**  
Amount of Each Disbursement this Period

Memo Item

**B. NRCC- Building Fund**

Full Name (Last, First, Middle Initial)

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Transfer of Net JFC Funds

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  Other (specify)  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB22.5125**  
Amount of Each Disbursement this Period

Memo Item

**C. WHAT A COUNTRY! PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 824 S. Milledge Ave Ste 101

City Athens State GA Zip Code 30605

Purpose of Disbursement  
Transfer of Net JFC Funds

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB22.5124**  
Amount of Each Disbursement this Period

Memo Item

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

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