

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 DEC -4 AM 11:43
Office Use Only

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

STRONG PARTY - ORG POLITICAL ACTION

ADDRESS (number and street) **PO Box 010230**

Check if different than previously reported. (ACC) **MIAMI FL 33101**

2. **FEC IDENTIFICATION NUMBER ▼** C00427625 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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 / 04 / 2008 in the State of FL

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

General (30G) Runoff (30R) Special (30S)

Election on 11 / 04 / 2008 in the State of FL

5. Covering Period 10 / 01 / 2008 through 11 / 24 / 2008

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 **SCOTT A. WACHOLTZ**

Signature of Treasurer  Date 12 / 02 / 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

STRONG PANTS.ORG POLITICAL ACTION

Report Covering the Period: From:

MM / DD / YYYY
10 / 01 / 2008

To:

MM / DD / YYYY
11 / 24 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYYYY 2008		16,583.52
(b) Cash on Hand at Beginning of Reporting Period.....	1,454.62	
(c) Total Receipts (from Line 19)	123.85	10,200.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,578.47	26,784.08
7. Total Disbursements (from Line 31)	7,349.9	25,940.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	843.48	843.48
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	750.00	



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

28039940474

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

STRONG PARTY.ORG POLITICAL ACTION

Report Covering the Period:

From:

10 / 01 / 2008

To:

11 / 24 / 2008

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).....

[Empty box]

8960.00

(ii) Unitemized.....

[Empty box]

[Empty box]

(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶

[Empty box]

8980.00

(b) Political Party Committees.....

[Empty box]

[Empty box]

(c) Other Political Committees (such as PACs).....

[Empty box]

1074.96

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶

[Empty box]

10054.96

12. Transfers From Affiliated/Other Party Committees.....

[Empty box]

[Empty box]

13. All Loans Received.....

[Empty box]

[Empty box]

14. Loan Repayments Received.....

[Empty box]

[Empty box]

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

123.85

123.85

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

[Empty box]

[Empty box]

17. Other Federal Receipts (Dividends, Interest, etc.).....

[Empty box]

21.75

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

[Empty box]

[Empty box]

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

[Empty box]

[Empty box]

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

[Empty box]

[Empty box]

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶

123.85

10200.56

20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶

123.85

10200.56

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DETAILED SUMMARY PAGE
of Disbursements

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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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	234.99	11,140.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	234.99	11,140.60
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		9,050.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	500.00	5,750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	734.99	25,940.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	734.99	25,940.60

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	8980.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	8980.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	23499	1114060
37. Offsets to Operating Expenditures (from Line 15, page 3)	12385	12385
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11114	1101675

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**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 1 OF 1
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
STRONG PARTY.ORG POLITICAL ACTION

Full Name (Last, First, Middle Initial) A. BANK OF AMERICA		Date of Receipt 10 / 16 / 2008
Mailing Address 150 W. FLAGLER ST		Amount of Each Receipt this Period 3400
City MIAMI	State Zip Code FL 33130	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input checked="" type="checkbox"/> Other (specify) ▼ SERVICE FEE REFUND		

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Receipt 11 / 12 / 2008
Mailing Address 150 W. FLAGLER ST		Amount of Each Receipt this Period 89.85
City MIAMI	State Zip Code FL 33130	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	183.85
TOTAL This Period (last page this line number only).....▶	183.85

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**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)						PAGE 1 OF 2	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
STRONG PARTY.ORG POLITICAL ACTION

A.

Full Name (Last, First, Middle Initial)
WALGNEENS

Date of Disbursement
10 / 07 / 2008

Mailing Address
200 SW 13th ST

City **MIAMI** State **FL** Zip Code **33130**

Purpose of Disbursement
COMMITTEE RECEPTION SUPPLIES

Candidate Name

Amount of Each Disbursement this Period
13.89

Category/Type
003

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

State: District:

B.

Full Name (Last, First, Middle Initial)
PUBLIX

Date of Disbursement
10 / 07 / 2008

Mailing Address
134 SW 13th ST

City **MIAMI** State **FL** Zip Code **33130**

Purpose of Disbursement
COMMITTEE RECEPTION SUPPLIES

Candidate Name

Amount of Each Disbursement this Period
118.41

Category/Type
003

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

State: District:

C.

Full Name (Last, First, Middle Initial)
US POSTAL SERVICE

Date of Disbursement
10 / 14 / 2008

Mailing Address
500 NW 20 AVE

City **MIAMI** State **FL** Zip Code **33101**

Purpose of Disbursement
POSTAGE PURCHASE

Candidate Name

Amount of Each Disbursement this Period
1.650

Category/Type

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶ **148.90**

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

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**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)

PAGE 1 OF 1

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

STRONG PARTY.ORG POLITICAL ACTION

Full Name (Last, First, Middle Initial)

A.

HARVEY RUVIN CAMPAIGN FUND

Mailing Address
PO BOX 012461

City **MIAMI** State **FL** Zip Code **33101**

Purpose of Disbursement
CAMPAIGN CONTRIBUTION

Candidate Name
HARVEY RUVIN

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **FL** District: _____

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2008

Amount of Each Disbursement this Period

Amount
500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Amount

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Amount

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

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

Amount
500.00

Amount
500.00

28039940481

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
STRONG PARTY.ORG POLITICAL ACTION

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VISA	Nature of Debt (Purpose): ADVANCED PAYMENT FOR EVENT TICKETS FROM US CUBA DEMOCRACY PAC
Mailing Address 150 W FLAGLER ST	
City State Zip Code MIAMI FL 33130	

Outstanding Balance Beginning This Period 750.00	Payment This Period	Outstanding Balance at Close of This Period 750.00
Amount Incurred This Period 750.00		

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
Amount Incurred This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
Amount Incurred This Period		

1) SUBTOTALS This Period This Page (optional)..... ▶	750.00
2) TOTALS This Period (last page this line number only)..... ▶	750.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked 12/3/08
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked



PREPARER
(3/2005)

12/4/08

DATE PREPARED

28039940483