

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CARLOS CURBELO CONGRESS

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))....	46831.00	1319057.42
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	46831.00	1319057.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	295136.15	683334.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	220.00	220.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	294916.15	683114.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	638032.28	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CARLOS CURBELO CONGRESS

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).....	29950.00	1119874.53
(ii) Unitemized.....	2381.00	25101.50
(iii) TOTAL of contributions from individuals ▶	32331.00	1144976.03
(b) Political Party Committees.....	0.00	4250.00
(c) Other Political Committees (such as PACs).....	14500.00	169831.39
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	46831.00	1319057.42
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	2088.92	2088.92
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.)	220.00	220.00
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)..... ▶	49139.92	1321366.34

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	295136.15	683334.06
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) ►	295136.15	683334.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	884028.51
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	49139.92
25. SUBTOTAL (add Line 23 and Line 24).....	933168.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	295136.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	638032.28

**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 74
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Gian Carlo Alonso

Mailing Address 55 Merrick Way Apt 502

City State Zip Code
Coral Gables FL 33134

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

Name of Employer Occupation
Amerikooler VP of Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.7475

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael Bassett

Mailing Address 203 17th Street SE

City State Zip Code
Washington D.C. DC 20003

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

Name of Employer Occupation
AHCA Advocate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11AI.6996

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Dennis Brady Jr.

Mailing Address 3535 S Mooring Way

City State Zip Code
Miami FL 33133

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

Name of Employer Occupation
LSN Partners LLC Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 09 / 2014

Transaction ID : SA11AI.6491

Amount of Each Receipt this Period
2600.00

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

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

2950.00

**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 6 OF 74
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Brady Jr.

Mailing Address 3535 S Mooring Way

City Miami State FL Zip Code 33133

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

Name of Employer LSN Partners LLC Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : SA11AI.7426

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mr. Darryl Copeland

Mailing Address 22 Harbor Island Drive

City Key Largo State FL Zip Code 33037

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

Name of Employer Provident Realty Partners Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : SA11AI.6494

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward Easton

Mailing Address 10165 NW 19th Street

City Miami State FL Zip Code 33172

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

Name of Employer Edward W. Easton & Company Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.6482

Amount of Each Receipt this Period
200.00

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

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

3300.00

**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 7 OF 74
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. David Grohne		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014	
Mailing Address 25907 Murphy Road		Transaction ID : SA11AI.7031	
City Wilmington	State IL	Zip Code 60481-8340	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Independent Tube Corp.	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Margaret Grohne		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014	
Mailing Address 25907 Murphy Road		Transaction ID : SA11AI.7033	
City Wilmington	State IL	Zip Code 60481-8340	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. Mrs. Sherry Hage		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 2841 NE 38th Street		Transaction ID : SA11AI.7428	
City Fort Lauderdale	State FL	Zip Code 33308	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	6200.00

**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 8 OF 74
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Brian Harris

Mailing Address 1000 South Pointe Drive #1002

City Miami Beach State FL Zip Code 33139

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : SA11AI.6506

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Laurence Hirsch

Mailing Address 3811 Turtle Creek Blvd Ste 250

City Dallas State TX Zip Code 75219-4487

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

Name of Employer Highlander Partners Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11AI.7035

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Mr. Daniel Horan

Mailing Address 608 Whitehead Street

City Key West State FL Zip Code 33040

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

Name of Employer Horan Wallace & Higgins Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.7413

Amount of Each Receipt this Period
 250.00

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

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

3350.00

**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 9 OF 74
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Charles Humble

Mailing Address 11400 Fortune Circle

City State Zip Code
West Palm Beach FL 33414

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

Name of Employer Occupation
NITV Federal Services President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11AI.7037

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Jose Infante

Mailing Address 9789 NW 45th Lane

City State Zip Code
Miami FL 33178

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

Name of Employer Occupation
South Florida Maintenance Serv President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA11AI.7025

Amount of Each Receipt this Period
300.00

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

Mailing Address 4901 Vineland Road

City State Zip Code
Orlando FL 32311

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

Name of Employer Occupation
PMA Consultants LLC Professional Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA11AI.6483

Amount of Each Receipt this Period
500.00

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

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

1300.00

**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 10 OF 74
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Jesse Manzano

Mailing Address P.O Box 348068

City Miami State FL Zip Code 33234-8068

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

Name of Employer Military Occupation Military

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.6991

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Ismael Perera

Mailing Address 3650 NW South River Drive

City Miami State FL Zip Code 33142

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

Name of Employer Royal Rent-A-Car Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.7488

Amount of Each Receipt this Period
 1000.00

In-kind - Rental Car

C. Full Name (Last, First, Middle Initial)
Mr. Enrique Ramos

Mailing Address 483 Center Island Drive

City Golden Beach State FL Zip Code 33160

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : SA11AI.6504

Amount of Each Receipt this Period
 500.00

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

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

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 11 OF 74
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Edith Rios

Mailing Address 6335 NW 200th Street

City State Zip Code
Hialeah FL 33015

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

Name of Employer Occupation
Imhotep Construction Group Secretary

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.7424

Amount of Each Receipt this Period
2400.00

B. Full Name (Last, First, Middle Initial)
Pablo Rios

Mailing Address 6335 NW 200th St

City State Zip Code
Hialeah FL 33015-2185

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

Name of Employer Occupation
Imhotep Construction Group President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.7002

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Antonio Roca

Mailing Address 4535 SW 62nd Court

City State Zip Code
Miami FL 33155

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

Name of Employer Occupation
Roca Gonzalez PA Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.6989

Amount of Each Receipt this Period
500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 74
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Crescencio Ruiz

Mailing Address 3022 SW 132nd Court

City Miami State FL Zip Code 33175

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

Name of Employer Outdoor Empire Occupation Corporate Controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11AI.7406

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ms. Celeste Schettig

Mailing Address 609 Frances st.

City Key West State FL Zip Code 33040

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 03 / 2014

Transaction ID : SA11AI.7478

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Sharpe

Mailing Address 723 Fleming St

City Key West State FL Zip Code 33040

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11AI.6497

Amount of Each Receipt this Period
2600.00

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

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

2750.00

**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 13 OF 74
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Junior Silva		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 7095 North Waterway Drive #307		Transaction ID : SA11AI.7491	
City State Zip Code Miami FL 33155	Amount of Each Receipt this Period 1500.00 In-kind - Event Catering		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Jr's Catering President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. Orestes Wrves		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 7148 Sw 148 Pl.		Transaction ID : SA11AI.7470	
City State Zip Code Miami FL 33193	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. Mr. Greg Zimmerman		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 11752 E Desert Trail Rd		Transaction ID : SA11AI.6485	
City State Zip Code Scottsdale AZ 85259	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation City Concession Co. of Az Inc Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	29950.00

**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 14 OF 74
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Mailing Address **7575 E FULTON ROAD**
ATTN: SCOTT SMOES 56-3S

City **ADA** State **MI** Zip Code **49355**

FEC ID number of contributing federal political committee. **C C00034884**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.7442

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
BILIRAKIS FOR CONGRESS

Mailing Address **PO BOX 606**

City **TARPON SPRINGS** State **FL** Zip Code **34688**

FEC ID number of contributing federal political committee. **C C00408534**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
07 / 22 / 2014

Transaction ID : SA11C.6516

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
BUDGETHAWKS.COM

Mailing Address **315 WESTFIELD CIR**

City **ALPINE** State **UT** Zip Code **84004**

FEC ID number of contributing federal political committee. **C C00491183**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.7440

Amount of Each Receipt this Period
 500.00

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

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

2500.00

**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 15 OF 74
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)

Mailing Address 12176 CHANCERY STATION CIRCLE
 City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C C00404392**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11C.7072

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DANIEL WEBSTER FOR CONGRESS

Mailing Address 3400 OLD WINTER GARDEN ROAD
 City ORLANDO State FL Zip Code 32805

FEC ID number of contributing federal political committee. **C C00481911**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.7436

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
FARMERS GROUP, INC., FARMERS INSURANCE EXCHANGE, FIRE INSURANCE EXCHANGE AND TRUCK INSURAN

Mailing Address 2350 KERNER BLVD., SUITE 250
 City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C C00135681**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.7438

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... **5500.00**
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 16 OF 74
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
FRIENDS OF GEORGE LEMIEUX

Mailing Address 2640A MITCHAM DRIVE

City State Zip Code
TALLAHASSEE FL 32308

FEC ID number of contributing federal political committee. **C C00494971**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 08 2014

Transaction ID : SA11C.6513

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
HEARTDOCPAC

Mailing Address PO BOX 628

City State Zip Code
EVANSVILLE IN 47704

FEC ID number of contributing federal political committee. **C C00523381**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 31 2014

Transaction ID : SA11C.7070

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
I.P.H.F.H.A. INC. POLITICAL ACTION COMMITTEE INC.

Mailing Address 7829 E. ROCKHILL #201

City State Zip Code
WICHITA KS 67206

FEC ID number of contributing federal political committee. **C C00251447**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 06 2014

Transaction ID : SA11C.7444

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

**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 17 OF 74
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
NEXT CENTURY FUND

Mailing Address 116 S ROYAL STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00343947

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2014

Transaction ID : SA11C.7398

Amount of Each Receipt this Period
 2500.00

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

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

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

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

2500.00

14500.00

**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 18 OF 74
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
Curbelo Victory Committee

Mailing Address 2470 Daniells Bridge Road Ste 121

City Athens State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C** C00565374

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA12.7450

Amount of Each Receipt this Period
 2088.92

B. Full Name (Last, First, Middle Initial)
Mrs. Rosa Delacruz

Mailing Address 4 Harbor Point

City Key Biscayne State FL Zip Code 33149

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA12.7450.0

Amount of Each Receipt this Period
 2600.00

[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

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

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

2088.92

2088.92

**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 19 OF 74
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CARLOS CURBELO CONGRESS

A. Full Name (Last, First, Middle Initial)
USPS

Mailing Address 2200 nw 72nd avenue

City State Zip Code
miami FL 33152

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 31 2014

Transaction ID : SA14.7480

Amount of Each Receipt this Period
220.00

Refund

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

220.00

220.00

**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 20 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. AM Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 13167 NW 7th Street		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.7415
City Miami	State FL	
Zip Code 33182	Purpose of Disbursement GOTV	Category/ Type 007
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. AM Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 13167 NW 7th Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7051
City Miami	State FL	
Zip Code 33182	Purpose of Disbursement Sign Placement	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) c. Aneidot		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 3rd Street, Suite 2b 3		Amount of Each Disbursement this Period 436.50 Transaction ID : SB17.7453
City Baton Rouge	State LA	
Zip Code 70801	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2014	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6436.50
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 21 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Angie Printing		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 6341 North West 87th Avenue		Amount of Each Disbursement this Period 401.25 Transaction ID : SB17.6534
City Miami State FL Zip Code 33178	Purpose of Disbursement Printing 006 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Angie Printing		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 6341 North West 87th Avenue		Amount of Each Disbursement this Period 401.25 Transaction ID : SB17.6557
City Miami State FL Zip Code 33178	Purpose of Disbursement Printing 006 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. eddy armas		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 11005 sw 1st street apt 107		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.6550
City miami State FL Zip Code 33174	Purpose of Disbursement Printing 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	922.50
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 22 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 258.67 Transaction ID : SB17.6546
City Carol Stream	State IL	
Purpose of Disbursement Phone Services	Category/ Type 001	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.6576
City Carol Stream	State IL	
Purpose of Disbursement Phone Services	Category/ Type 001	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 166.08 Transaction ID : SB17.6590
City Carol Stream	State IL	
Purpose of Disbursement Internet Services	Category/ Type 001	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	684.75
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 23 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address PO BOX 982235		Amount of Each Disbursement this Period 4486.74
City El Paso	State TX	
Zip Code 79998	Purpose of Disbursement Reimbursement- See Memo	Transaction ID : SB17.6544
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Paris Bakery		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 212 S Olive Ave		Amount of Each Disbursement this Period 402.50
City West Palm Beach	State FL	
Zip Code 33401	Purpose of Disbursement Catering	Transaction ID : SB17.6544.1
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 12495 SW 88th St		Amount of Each Disbursement this Period 424.05
City Miami	State FL	
Zip Code 33186	Purpose of Disbursement Computer	Transaction ID : SB17.6544.3
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	4486.74
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 24 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Shivers BBQ		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 28001 S Dixie Hwy		Amount of Each Disbursement this Period 212.58
City Homestead State FL Zip Code 33033	Purpose of Disbursement Volunteer Food Category/Type 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6544.12 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period 225.75
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies Category/Type 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6544.13 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period 204.97
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies Category/Type	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6544.14 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	0.00
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 25 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Custom Uniforms		M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 12371 SW 128th Court		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33186	Purpose of Disbursement Shirts	1840.94
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 006	Transaction ID : SB17.6544.21
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: FL District: 26		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Islas Canarias		M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food	37.69
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 007	Transaction ID : SB17.6544.22
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: FL District: 26		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Office Max		M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies	127.06
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 001	Transaction ID : SB17.6544.23
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 26 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Bank of Coral Gables		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 2295 Galiano St		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.6587
City Coral Gables	State FL	
Purpose of Disbursement Bank Fee	001	Candidate Name CARLOS CURBELO CONGRESS Category/ Type
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. Bank of Coral Gables		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2295 Galiano St		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.7417
City Coral Gables	State FL	
Purpose of Disbursement Bank Fee	001	Candidate Name CARLOS CURBELO CONGRESS Category/ Type
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) c. Bank of Coral Gables		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2295 Galiano St		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.7418
City Coral Gables	State FL	
Purpose of Disbursement Bank Fee	001	Candidate Name CARLOS CURBELO CONGRESS Category/ Type
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	60.00
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 27 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Bank of Coral Gables		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2295 Galiano St		Amount of Each Disbursement this Period 20.00
City Coral Gables	State FL	
Zip Code 33134	Purpose of Disbursement Bank Fee	001
Candidate Name CARLOS CURBELO CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Bank of Coral Gables		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 2295 Galiano St		Amount of Each Disbursement this Period 20.00
City Coral Gables	State FL	
Zip Code 33134	Purpose of Disbursement Bank Fee	001
Candidate Name CARLOS CURBELO CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) c. kevin Cabrera		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 12868 sw 60th street		Amount of Each Disbursement this Period 2500.00
City miami	State FL	
Zip Code 33183	Purpose of Disbursement Field Work Coordination	001
Candidate Name CARLOS CURBELO CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	2540.00
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 28 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. kevin Cabrera		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 12868 sw 60th street		Amount of Each Disbursement this Period 9053.76 Transaction ID : SB17.6524
City miami State FL Zip Code 33183	Purpose of Disbursement Reimbursement-See Memo 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Repografia		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address P.O Box 740967		Amount of Each Disbursement this Period 139.15 Transaction ID : SB17.6524.0 [MEMO ITEM]
City Dallas State TX Zip Code 75374-0967	Purpose of Disbursement Printing 003 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 1715.00 Transaction ID : SB17.6524.3 [MEMO ITEM]
City miami State FL Zip Code 33152	Purpose of Disbursement Stamps 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	9053.76
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 29 OF 74	
	<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)
CARLOS CURBELO CONGRESS

A. USPS

Full Name (Last, First, Middle Initial)
Mailing Address 2200 nw 72nd avenue

City miami State FL Zip Code 33152

Purpose of Disbursement Stamps

Candidate Name **CARLOS CURBELO CONGRESS**

Office Sought: House Senate President
State: FL District: 26

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 06 / 20 / 2014

Amount of Each Disbursement this Period: 49.99

Transaction ID : SB17.6524.6

[MEMO ITEM]

B. Occupancy Permit

Full Name (Last, First, Middle Initial)
Mailing Address 5710 SW 41st St

City Miami State FL Zip Code 33155

Purpose of Disbursement Office Permit

Candidate Name **CARLOS CURBELO CONGRESS**

Office Sought: House Senate President
State: FL District: 26

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 06 / 20 / 2014

Amount of Each Disbursement this Period: 229.79

Transaction ID : SB17.6524.7

[MEMO ITEM]

c. Repografia

Full Name (Last, First, Middle Initial)
Mailing Address P.O Box 740967

City Dallas State TX Zip Code 75374-0967

Purpose of Disbursement Printing

Candidate Name **CARLOS CURBELO CONGRESS**

Office Sought: House Senate President
State: FL District: 26

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 06 / 19 / 2014

Amount of Each Disbursement this Period: 188.30

Transaction ID : SB17.6524.8

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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 30 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 21.00
City miami State FL Zip Code 33152	Purpose of Disbursement Shipping Cost 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6524.13 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 294.00
City Miami State FL Zip Code 33175	Purpose of Disbursement Stamps 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6524.21 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 17.65
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6524.22 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 31 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 220.00
City miami State FL Zip Code 33152	Purpose of Disbursement Mail Permit	Transaction ID : SB17.6524.26
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Ikea		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 1801 NW 117th Avenue,		Amount of Each Disbursement this Period 222.53
City Miami State FL Zip Code 33172	Purpose of Disbursement Office Furniture	Transaction ID : SB17.6524.28
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 2.77
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food	Transaction ID : SB17.6524.31
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 007	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 32 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Repografia		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address P.O Box 740967		Amount of Each Disbursement this Period 292.94
City Dallas	State TX	
Zip Code 75374-0967		
Purpose of Disbursement Printing		Category/ Type 003
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 11695 N Kendall Dr		Amount of Each Disbursement this Period 75.00
City Miami	State FL	
Zip Code 33176		
Purpose of Disbursement Gas		Category/ Type 002
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) C. Arrowmail		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 9825 NW 17th St		Amount of Each Disbursement this Period 2160.94
City Miami	State FL	
Zip Code 33172		
Purpose of Disbursement Printing		Category/ Type 003
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 33 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 147.00
City miami State FL Zip Code 33152	Purpose of Disbursement Stamps 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6524.38 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Groundswell Strategies		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 705 SW 5th Avenue		Amount of Each Disbursement this Period 1794.70
City Miami State FL Zip Code 33130	Purpose of Disbursement Printing 003	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6524.39 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Arrowmail		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 9825 NW 17th St		Amount of Each Disbursement this Period 274.01
City Miami State FL Zip Code 33172	Purpose of Disbursement Printing 003	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6524.40 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 34 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 37.15
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Volunteer Food	[MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 007	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. kevin Cabrera		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 12868 sw 60th street		Amount of Each Disbursement this Period 722.00
City miami	State FL	
Zip Code 33183	Purpose of Disbursement Mileage Reimbursement	[MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. kevin Cabrera		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 12868 sw 60th street		Amount of Each Disbursement this Period 2679.00
City miami	State FL	
Zip Code 33183	Purpose of Disbursement Reimbursement-See Memo	[MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	3401.00
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 35 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address PO Box 5014		Amount of Each Disbursement this Period 120.00
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Cell Phone Service	Transaction ID : SB17.7062.0 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 4.03
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Volunteer Food	Transaction ID : SB17.7062.1 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 007	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 11.53
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Volunteer Food	Transaction ID : SB17.7062.3 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 007	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 36 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 11305 SW 40th St,		Amount of Each Disbursement this Period 4.01
City Miami State FL Zip Code 33165	Purpose of Disbursement Office Supplies	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.5 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Minuteman Press		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1704 Ponce de Leon Blvd		Amount of Each Disbursement this Period 642.00
City Coral Gables State FL Zip Code 33134	Purpose of Disbursement Printing	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.9 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26	Category/Type 003	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 33.71
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.12 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26	Category/Type 007	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 37 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Target		Date of Disbursement MM / DD / YYYY 07 / 06 / 2014
Mailing Address 15005 SW 88th St		Amount of Each Disbursement this Period 128.36
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies Category/Type 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.16 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Islas Canarias		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 3.53
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food Category/Type 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.17 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Nonna Bistro		Date of Disbursement MM / DD / YYYY 07 / 31 / 2014
Mailing Address 14146 SW 8th St		Amount of Each Disbursement this Period 27.50
City Miami State FL Zip Code 33184	Purpose of Disbursement Volunteer Food Category/Type 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.20 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 38 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 6.75
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.23 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 26.76
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.26 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 15.85
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.29 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 39 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Nonna Bistro		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 14146 SW 8th St		Amount of Each Disbursement this Period 28.16
City Miami State FL Zip Code 33184	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.30 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 41.88
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.32 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 19.00
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.35 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 40 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 5.34
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.37 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Repografia		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address P.O Box 740967		Amount of Each Disbursement this Period 401.52
City Dallas State TX Zip Code 75374-0967	Purpose of Disbursement Printing 003	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.39 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 28.68
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.40 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 41 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 26.76
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.42 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Fedex		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 2417 Ponce de Leon Blvd		Amount of Each Disbursement this Period 50.30
City Miami State FL Zip Code 33134	Purpose of Disbursement Printing 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.43 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Chevron		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 2201 SW 122nd Ave		Amount of Each Disbursement this Period 70.11
City Miami State FL Zip Code 33175	Purpose of Disbursement Gas 002	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7062.46 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 42 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Chevron		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 2201 SW 122nd Ave		Amount of Each Disbursement this Period 68.14
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Gas	Transaction ID : SB17.7062.47 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Chevron		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 2201 SW 122nd Ave		Amount of Each Disbursement this Period 70.22
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Gas	Transaction ID : SB17.7062.48 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. Alexis Cajigas		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 8030 Los Pinos Circle		Amount of Each Disbursement this Period 500.00
City Coral Gables	State FL	
Zip Code 33143	Purpose of Disbursement Administrative Assistance	Transaction ID : SB17.6582
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	500.00
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 43 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Ms. Luz Marina Castro		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2430 SW 127th Court		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7042
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement GOTV	Category/ Type 007
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. Citibank		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO Box 183037		Amount of Each Disbursement this Period 551.54 Transaction ID : SB17.6561
City Columbus	State OH	
Zip Code 43218	Purpose of Disbursement Reimbursement- See Memo	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 245.00 Transaction ID : SB17.6561.0 [MEMO ITEM]
City miami	State FL	
Zip Code 33152	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	1051.54
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 44 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 39.70
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6561.1 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Publix		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 32.47
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6561.4 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Publix		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 52.62
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6561.6 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 45 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Home Depot		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 11305 SW 40th St,		Amount of Each Disbursement this Period 28.76
City Miami State FL Zip Code 33165	Purpose of Disbursement Office Supplies 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6561.7 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Citibank		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address PO Box 183037		Amount of Each Disbursement this Period 1578.17
City Columbus State OH Zip Code 43218	Purpose of Disbursement Reimbursement-See Memo 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7067
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period 207.53
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7067.0 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1578.17
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 46 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Sombrero Resort		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 19 Sombrero Blvd		Amount of Each Disbursement this Period 113.58
City Marathon	State FL	
Purpose of Disbursement Hotel		Transaction ID : SB17.7067.3 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Sombrero Resort		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 19 Sombrero Blvd		Amount of Each Disbursement this Period 124.82
City Marathon	State FL	
Purpose of Disbursement Hotel		Transaction ID : SB17.7067.4 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. Marriott		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3841 N Roosevelt Blvd		Amount of Each Disbursement this Period 212.63
City Key West	State FL	
Purpose of Disbursement Hotel		Transaction ID : SB17.7067.5 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 47 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Marriott		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3841 N Roosevelt Blvd		Amount of Each Disbursement this Period 212.63
City Key West	State FL	
Zip Code 33040		
Purpose of Disbursement Hotel		Category/Type 002
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Marriott		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3841 N Roosevelt Blvd		Amount of Each Disbursement this Period 267.64
City Key West	State FL	
Zip Code 33040		
Purpose of Disbursement Hotel		Category/Type 002
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

Full Name (Last, First, Middle Initial) c. Fedex		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2417 Ponce de Leon Blvd		Amount of Each Disbursement this Period 17.33
City Miami	State FL	
Zip Code 33134		
Purpose of Disbursement Printing		Category/Type 001
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 48 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Fedex		Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 2417 Ponce de Leon Blvd		Amount of Each Disbursement this Period 103.50
City Miami	State FL Zip Code 33134	
Purpose of Disbursement Sign Printing	Category/Type 006	Transaction ID : SB17.7067.9 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Clark Hill		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 601 Pennsylvania Ave NW North Building		Amount of Each Disbursement this Period 3000.00
City Washington D.C.	State DC Zip Code 20004	
Purpose of Disbursement Political Law Compliance	Category/Type 001	Transaction ID : SB17.6560
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. Clark Hill		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 601 Pennsylvania Ave NW North Building		Amount of Each Disbursement this Period 3000.00
City Washington D.C.	State DC Zip Code 20004	
Purpose of Disbursement Political Law Compliance	Category/Type 001	Transaction ID : SB17.6570
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional)	6000.00
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 49 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. George Cortina		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 1915 SW 123rd Court		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.6529
City Miami State FL Zip Code 33175	Purpose of Disbursement Field Coordination 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. George Cortina		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1915 SW 123rd Court		Amount of Each Disbursement this Period 716.00 Transaction ID : SB17.7061
City Miami State FL Zip Code 33175	Purpose of Disbursement Field Coordination 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. DJ Group		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 200 W College Ave #301		Amount of Each Disbursement this Period 8000.00 Transaction ID : SB17.6556
City Tallahassee State FL Zip Code 32301	Purpose of Disbursement Consulting Services 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	9116.00
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 50 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Electrol Strategies Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 2121 NE 211th Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6551
City miami State FL Zip Code 33179	Purpose of Disbursement Consulting Services 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. FIA Card Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address P.O. Box 15019		Amount of Each Disbursement this Period 4060.63 Transaction ID : SB17.7040
City Wilmington State DE Zip Code 19850	Purpose of Disbursement Reimbursement - See Memo 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 3200 E Airfield Dr		Amount of Each Disbursement this Period 752.00 Transaction ID : SB17.7040.1 [MEMO ITEM]
City DFW State TX Zip Code 75261	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	5060.63
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 51 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Delta Airlines Atlanta		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 497.00
City Atlanta State GA Zip Code 30354	Purpose of Disbursement Airfare 002	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7040.2 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 11695 N Kendall Dr		Amount of Each Disbursement this Period 63.84
City Miami State FL Zip Code 33176	Purpose of Disbursement Gas 002	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7040.3 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Grand Bay Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 425 Grand Bay Dr		Amount of Each Disbursement this Period 1755.00
City Key Biscayne State FL Zip Code 33149	Purpose of Disbursement Catering 003	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7040.4 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 52 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Delta Airlines Atlanta		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 225.00
City Atlanta State GA Zip Code 30354	Purpose of Disbursement Airfare	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7040.5 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26	Category/Type 002	

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 182 Howard Street # 8		Amount of Each Disbursement this Period 53.00
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Transportation	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7040.8 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Holiday Inn LaGuardia		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 37-10 114th St		Amount of Each Disbursement this Period 353.66
City New York City State NY Zip Code 11368	Purpose of Disbursement Hotel	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7040.10 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 53 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 11695 N Kendall Dr		Amount of Each Disbursement this Period 44.18
City Miami	State FL	
Zip Code 33176	Purpose of Disbursement Gas	Transaction ID : SB17.7040.11 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 11695 N Kendall Dr		Amount of Each Disbursement this Period 68.67
City Miami	State FL	
Zip Code 33176	Purpose of Disbursement Gas	Transaction ID : SB17.7040.12 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. Ilka H. Figueras		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 7014 SW 114 PI Apt E		Amount of Each Disbursement this Period 340.00
City Miami	State FL	
Zip Code 33173	Purpose of Disbursement GOTV	Transaction ID : SB17.7049
Candidate Name CARLOS CURBELO CONGRESS	Category/ Type 007	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	340.00
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 54 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FPL		M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address General Mail Facility		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33188		209.55
Purpose of Disbursement Electric Services	Category/Type 001	Transaction ID : SB17.6588
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. GridIron Communications		M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO Box 1308		Amount of Each Disbursement this Period
City Granger State IL Zip Code 46530		12667.04
Purpose of Disbursement Direct Mail	Category/Type 003	Transaction ID : SB17.6577
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. GridIron Communications		M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 1308		Amount of Each Disbursement this Period
City Granger State IL Zip Code 46530		2831.12
Purpose of Disbursement Direct Mail	Category/Type 003	Transaction ID : SB17.7060
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	15707.71
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 55 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Gridiron Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address PO Box 1308		Amount of Each Disbursement this Period 6712.00 Transaction ID : SB17.7065
City Granger	State IL	
Zip Code 46530	Purpose of Disbursement Direct Mail	Category/ Type 003
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. Groundswell Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 705 SW 5th Avenue		Amount of Each Disbursement this Period 2657.50 Transaction ID : SB17.7053
City Miami	State FL	
Zip Code 33130	Purpose of Disbursement Direct Mail	Category/ Type 003
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) c. Mirta Iglesias		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 177 Ocean Lane Drive #208		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.7055
City Key Biscayne	State FL	
Zip Code 33149	Purpose of Disbursement Translation Services	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	9519.50
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 56 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Marin & Sons		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 16155 SW 117th Avenue Suite B-21		Amount of Each Disbursement this Period 8400.00 Transaction ID : SB17.7058
City Miami State FL Zip Code 33177	Category/Type 007	
Purpose of Disbursement Phone Bank	Candidate Name CARLOS CURBELO CONGRESS	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Miami Dade County		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 111 NW 1 St ste 710		Amount of Each Disbursement this Period 312.74 Transaction ID : SB17.6585
City miami State FL Zip Code 33128-1984	Category/Type 001	
Purpose of Disbursement Water & Sewer Fees	Candidate Name CARLOS CURBELO CONGRESS	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Chris Miles		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 13383 SW Bird Road		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.6533
City Miami State FL Zip Code 33175	Category/Type 001	
Purpose of Disbursement Strategic Consulting	Candidate Name CARLOS CURBELO CONGRESS	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	12212.74
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 57 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Chris Miles		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 13383 SW Bird Road		Amount of Each Disbursement this Period 4792.92 Transaction ID : SB17.6552
City Miami	State FL	
Purpose of Disbursement Reimbursement-See Memo		Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 2450.00 Transaction ID : SB17.6552.0 [MEMO ITEM]
City miami	State FL	
Purpose of Disbursement Stamps		Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 588.00 Transaction ID : SB17.6552.1 [MEMO ITEM]
City miami	State FL	
Purpose of Disbursement Stamps		Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	4792.92
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 58 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2200 nw 72nd avenue		Amount of Each Disbursement this Period 1029.00
City miami State FL Zip Code 33152	Purpose of Disbursement Stamps 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6552.2 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 21.39
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6552.3 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 3.15
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.6552.8 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 59 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Westar 8 Street		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 7411 SW 8th Street		Amount of Each Disbursement this Period 80.73
City Miami State FL Zip Code 33144	Purpose of Disbursement Gas	Transaction ID : SB17.6552.13
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 002	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Chevron		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2201 SW 122nd Ave		Amount of Each Disbursement this Period 100.00
City Miami State FL Zip Code 33175	Purpose of Disbursement Gas	Transaction ID : SB17.6552.15
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 002	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. Publix		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 11495 Bird Rd		Amount of Each Disbursement this Period 5.34
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food	Transaction ID : SB17.6552.18
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 007	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 60 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Chris Miles		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 13383 SW Bird Road		Amount of Each Disbursement this Period 687.08 Transaction ID : SB17.6581
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Reimbursement-See Memo	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. Shell Oil		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 11695 N Kendall Dr		Amount of Each Disbursement this Period 2.00 Transaction ID : SB17.6581.3 [MEMO ITEM]
City Miami	State FL	
Zip Code 33176	Purpose of Disbursement Volunteer Food	Category/ Type 007
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period 181.81 Transaction ID : SB17.6581.8 [MEMO ITEM]
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	687.08
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 61 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Hess		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 99601 Overseas Highway		Amount of Each Disbursement this Period 101.00
City Key Largo	State FL	
Zip Code 33037	Purpose of Disbursement Gas	Transaction ID : SB17.6581.10 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. Chris Miles		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 13383 SW Bird Road		Amount of Each Disbursement this Period 1388.15
City Miami	State FL	
Zip Code 33175	Purpose of Disbursement Reimbursement-See Memo	Transaction ID : SB17.7063
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. Islander Resort		Date of Disbursement MM / DD / YYYY 07 / 19 / 2014
Mailing Address 82100 Overseas Hwy		Amount of Each Disbursement this Period 212.63
City Islamorada	State FL	
Zip Code 33036	Purpose of Disbursement Hotel	Transaction ID : SB17.7063.0 [MEMO ITEM]
Candidate Name CARLOS CURBELO CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	1388.15
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 62 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 16.59
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7063.20 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 16.29
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7063.21 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 8.52
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7063.28 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 63 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Islas Canarias		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 3804 SW 137th Ave		Amount of Each Disbursement this Period 2.79
City Miami State FL Zip Code 33175	Purpose of Disbursement Volunteer Food Category/Type 007	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7063.29 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period 56.14
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies Category/Type 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7063.31 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 11815 SW 26th Street		Amount of Each Disbursement this Period 143.86
City Miami State FL Zip Code 33175	Purpose of Disbursement Office Supplies Category/Type 001	
Candidate Name CARLOS CURBELO CONGRESS		Transaction ID : SB17.7063.32 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 64 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Minuteman Press		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 1704 Ponce de Leon Blvd		Amount of Each Disbursement this Period 647.36 Transaction ID : SB17.6558
City Coral Gables	State FL	
Zip Code 33134	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. MV ALMER		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 13333 SW 59th Court		Amount of Each Disbursement this Period 2241.00 Transaction ID : SB17.6526
City Miami	State FL	
Zip Code 33156	Purpose of Disbursement Senior Center Organization	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) C. MV ALMER		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 13333 SW 59th Court		Amount of Each Disbursement this Period 395.00 Transaction ID : SB17.7421
City Miami	State FL	
Zip Code 33156	Purpose of Disbursement Senior Center Organization	Category/ Type 001
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional)	3283.36
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 65 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. National Victory Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 6416 SW 15th Street		Amount of Each Disbursement this Period 6200.00 Transaction ID : SB17.6521
City Miami State FL Zip Code 33144	Purpose of Disbursement Media Consulting 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. National Victory Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 6416 SW 15th Street		Amount of Each Disbursement this Period 9000.00 Transaction ID : SB17.6565
City Miami State FL Zip Code 33144	Purpose of Disbursement Media Buy 004 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. National Victory Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 6416 SW 15th Street		Amount of Each Disbursement this Period 5017.04 Transaction ID : SB17.6584
City Miami State FL Zip Code 33144	Purpose of Disbursement TV Production 004 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	20217.04
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 66 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. National Victory Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 6416 SW 15th Street		Amount of Each Disbursement this Period 37100.00 Transaction ID : SB17.6586
City Miami State FL Zip Code 33144	Purpose of Disbursement Media Buy 004 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. National Victory Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 6416 SW 15th Street		Amount of Each Disbursement this Period 13030.00 Transaction ID : SB17.7041
City Miami State FL Zip Code 33144	Purpose of Disbursement Medi Buy 004 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. National Victory Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 6416 SW 15th Street		Amount of Each Disbursement this Period 16249.00 Transaction ID : SB17.7064
City Miami State FL Zip Code 33144	Purpose of Disbursement Media Buy 004 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	66379.00
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 67 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. OnMessage Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 815 Slaters Lane		Amount of Each Disbursement this Period 21476.64 Transaction ID : SB17.6566
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) B. OnMessage Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 815 Slaters Lane		Amount of Each Disbursement this Period 16185.12 Transaction ID : SB17.6579
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

Full Name (Last, First, Middle Initial) c. OnMessage Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 815 Slaters Lane		Amount of Each Disbursement this Period 20385.00 Transaction ID : SB17.7066
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: FL District: 26	

SUBTOTAL of Disbursements This Page (optional).....	58046.76
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 68 OF 74		
	<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)
CARLOS CURBELO CONGRESS

A. On Point Consulting Professionals

Full Name (Last, First, Middle Initial)
Mailing Address 8937 SW 12th Street

City Miami State FL Zip Code 33174

Purpose of Disbursement Table Fee

Candidate Name **CARLOS CURBELO CONGRESS**

Office Sought: House Senate President
State: FL District: 26

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.6519

Category/Type: 004

B. Sonia Oropesa

Full Name (Last, First, Middle Initial)
Mailing Address 8255 SW 152 Ave Apt #112

City Miami State FL Zip Code 33186

Purpose of Disbursement GOTV

Candidate Name **CARLOS CURBELO CONGRESS**

Office Sought: House Senate President
State: FL District: 26

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 07 / 30 / 2014

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.7048

Category/Type: 007

c. Mr. Ismael Perera

Full Name (Last, First, Middle Initial)
Mailing Address 3650 NW South River Drive

City Miami State FL Zip Code 33142

Purpose of Disbursement In-kind - Rental Car

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify)

Date of Disbursement: 08 / 06 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.7489

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 1650.00

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 69 OF 74	
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Maria L. Perez		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 6859 SW 22 St		Amount of Each Disbursement this Period 340.00 Transaction ID : SB17.7050
City Miami	State FL	
Purpose of Disbursement GOTV		Category/ Type 007
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. PR Concepts		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 8770 sunset drive #333		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.6528
City miami	State FL	
Purpose of Disbursement Door Hangers		Category/ Type 006
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) c. PR Concepts		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address 8770 sunset drive #333		Amount of Each Disbursement this Period 7159.60 Transaction ID : SB17.7039
City miami	State FL	
Purpose of Disbursement Direct Mail		Category/ Type 003
Candidate Name CARLOS CURBELO CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	8249.60
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 70 OF 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Ms. Nicole Rapanos		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1403 SW 29th Avenue		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.6522
City Miami State FL Zip Code 33145	Purpose of Disbursement Campaign Management 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. RDA Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1334 SW 131 PI Circle E		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.6540
City Miami State FL Zip Code 33184	Purpose of Disbursement Sign Placement 007 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. RDA Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1334 SW 131 PI Circle E		Amount of Each Disbursement this Period 706.00 Transaction ID : SB17.6555
City Miami State FL Zip Code 33184	Purpose of Disbursement Sign Placement 007 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	6606.00
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 71 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Realistic Ideas		M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 3695 SW 149th Avenue		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33185		8543.00
Purpose of Disbursement Phone Bank	Category/Type 007	Transaction ID : SB17.6525
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Realistic Ideas		M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 3695 SW 149th Avenue		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33185		1788.00
Purpose of Disbursement Phone Bank	Category/Type 007	Transaction ID : SB17.6548
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Realistic Ideas		M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 3695 SW 149th Avenue		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33185		3223.00
Purpose of Disbursement Phone Bank	Category/Type 007	Transaction ID : SB17.6569
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	13554.00
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 72 OF 74		
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Realistic Ideas		M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 3695 SW 149th Avenue		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33185		666.00
Purpose of Disbursement Phone Bank	Category/Type 007	Transaction ID : SB17.6580
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Realistic Ideas		M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3695 SW 149th Avenue		Amount of Each Disbursement this Period
City Miami State FL Zip Code 33185		5862.00
Purpose of Disbursement Phone Bank	Category/Type 007	Transaction ID : SB17.7043
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Repografia		M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address P.O Box 740967		Amount of Each Disbursement this Period
City Dallas State TX Zip Code 75374-0967		264.71
Purpose of Disbursement Printing	Category/Type 003	Transaction ID : SB17.6542
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: FL District: 26	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6792.71
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 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Republican Party of Monroe County		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address PO BOX 500711		Amount of Each Disbursement this Period 325.00 Transaction ID : SB17.6553
City Marathon	State FL	
Purpose of Disbursement Reagan Dinner Advertisement	Category/ Type 007	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: FL	District: 26	

Full Name (Last, First, Middle Initial) B. Republican Party of Monroe County		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014
Mailing Address PO BOX 500711		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7423
City Marathon	State FL	
Purpose of Disbursement Reagan Dinner Tickets	Category/ Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) C. Mr. Junior Silva		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 7095 North Waterway Drive #307		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.7492
City Miami	State FL	
Purpose of Disbursement In-kind - Event Catering	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2325.00
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 74			
	<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)
CARLOS CURBELO CONGRESS

Full Name (Last, First, Middle Initial) A. Strategic Information Consultants		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 4100 Biltmore Avenue		Amount of Each Disbursement this Period 5500.00 Transaction ID : SB17.6549
City Tallahassee State FL Zip Code 32311	Purpose of Disbursement Research Consulting 001 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) B. The Shark Tank		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address P.O Box 11804		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6567
City Ft. Lauderdale State FL Zip Code 33339	Purpose of Disbursement Advertisement 004 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) C. ZDB inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 131 Madeira Avenue		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.6538
City Coral Gables State FL Zip Code 33134	Purpose of Disbursement Fundraising Consulting 003 Category/Type	
Candidate Name CARLOS CURBELO CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	294143.16