



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
U.S.-Cuba Democracy Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		368188.39
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	368188.39									
(c) Total Receipts (from Line 19) .....	64805.58	64805.58								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	432993.97	432993.97								
7. Total Disbursements (from Line 31) .....	132380.17	132380.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	300613.80	300613.80								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
U.S.-Cuba Democracy Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	61992.08	61992.08
(i) Itemized (use Schedule A) .....	2813.50	2813.50
(ii) Unitemized .....	64805.58	64805.58
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	64805.58	64805.58
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	64805.58	64805.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	64805.58	64805.58

**DETAILED SUMMARY PAGE**

of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	24880.17	24880.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	24880.17	24880.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	106500.00	106500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	1000.00	1000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	132380.17	132380.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	132380.17	132380.17

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	64805.58	64805.58
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	63805.58	63805.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24880.17	24880.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24880.17	24880.17

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Cesar L. Alvarez</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 6	
Mailing Address 1221 Brickell Avenue		<b>Transaction ID: SA11A1.7573</b>	
City State Zip Code Miami FL 33131		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Greenberg Traurig, L.L.P. Chief Executive Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Jorge Arrizurieta</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6	
Mailing Address 1118 Placetas Avenue		<b>Transaction ID: SA11A1.7650</b>	
City State Zip Code Coral Gables FL 33146		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Akerman Senterfitt, L.L.P. Government Consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Jose A. Cancio</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6	
Mailing Address 799 Crandon Blvd. Apt. #307		<b>Transaction ID: SA11A1.7579</b>	
City State Zip Code Key Biscayne FL 33149		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Central Concrete Super Mix President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mrs. Mariana Cancio</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6	
Mailing Address 799 Crandon Blvd. Apt. #307		<b>Transaction ID: SA11A1.7580</b>	
City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Ana Carbonell Monge</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 6	
Mailing Address 193 Corydon Drive		<b>Transaction ID: SA11A1.7549</b>	
City State Zip Code Miami Springs FL 33166	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation District Director Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Alvah Chapman, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6	
Mailing Address 1690 South Bayshore Lane		<b>Transaction ID: SA11A1.7581</b>	
City State Zip Code Miami FL 33133	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Mauricio Claver-Carone, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 9 / 2 0 0 6	
Mailing Address 2501 M Street, N.W. #608		<b>Transaction ID:</b> SA11A1.7654	
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C	In-kind - FEC Seminar Costs		
Name of Employer Cuba Democracy Advocates, Inc.	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mauricio Claver-Carone, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 0 / 2 0 0 6	
Mailing Address 2501 M Street, N.W. #608		<b>Transaction ID:</b> SA11A1.7652	
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 85.92		
FEC ID number of contributing federal political committee. C	In-kind - Telephone Charges (MCI)		
Name of Employer Cuba Democracy Advocates, Inc.	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.92		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mauricio Claver-Carone, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 6	
Mailing Address 2501 M Street, N.W. #608		<b>Transaction ID:</b> SA11A1.7658	
City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 92.16		
FEC ID number of contributing federal political committee. C	In-kind - Telephone Charges (MCI)		
Name of Employer Cuba Democracy Advocates, Inc.	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.08		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	258.08
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Jorge Cutillas</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2006	
Mailing Address 4645 Village Drive		<b>Transaction ID: SA11A1.7630</b>	
City State Zip Code Dunwoody GA 30338		Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed Occupation Private Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Jorge DeCespedes</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2006	
Mailing Address 3075 N.W. 107th Avenue		<b>Transaction ID: SA11A1.7642</b>	
City State Zip Code Miami FL 33172		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Pharmed Group Corporation Occupation Co-Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Jeronimo M. Esteve</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 13621 Deering Bay Drive #1102		<b>Transaction ID: SA11A1.7635</b>	
City State Zip Code Coral Gables FL 33158		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Headquarter Toyota Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Miguel B. Fernandez		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address 5 Tahiti Beach Island		<b>Transaction ID:</b> SA11A1.7615	
City State Zip Code Coral Gables FL 33143		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MBF Health Care Partners		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Feliciano Foyo		Date of Receipt M M / D D / Y Y Y Y 01 / 26 / 2006	
Mailing Address 5915 Granada Blvd.		<b>Transaction ID:</b> SA11A1.7577	
City State Zip Code Coral Gables FL 33146		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Horacio Garcia		Date of Receipt M M / D D / Y Y Y Y 01 / 26 / 2006	
Mailing Address 6850 Riviera Drive		<b>Transaction ID:</b> SA11A1.7576	
City State Zip Code Coral Gables FL 33146		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Garcia Enterprises		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ruben Kloda		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address 2600 Island Blvd. #906		Transaction ID: SA11A1.7596	
City State Zip Code Williams Island FL 33160		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Atlantic Hosiery Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Aurelio Leyva		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 6	
Mailing Address 277 Marinero Court		Transaction ID: SA11A1.7565	
City State Zip Code Coral Gables FL 33143		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CEM Global Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Giraldo Leyva, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 6	
Mailing Address 680 Destacada Avenue		Transaction ID: SA11A1.7562	
City State Zip Code Coral Gables FL 33156		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Cargil International Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Hilda Leyva		Date of Receipt MM / DD / YYYY 01 / 18 / 2006
Mailing Address 7275 Old Cutler Road		<b>Transaction ID:</b> SA11A1.7567
City State Zip Code Coral Gables FL 33143	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Homemaker	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Miguel Angel Lopez		Date of Receipt MM / DD / YYYY 02 / 09 / 2006
Mailing Address 799 Crandon Blvd. Apt. 1502		<b>Transaction ID:</b> SA11A1.7592
City State Zip Code Key Biscayne FL 33149	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gus Machado		Date of Receipt MM / DD / YYYY 01 / 31 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		<b>Transaction ID:</b> SA11A1.7660
City State Zip Code Miami Beach FL 33154	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00
Name of Employer Occupation President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.50
		In-kind - Rent

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gus Machado		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6
Mailing Address 5055 Collins Avenue Unit 3N		<b>Transaction ID:</b> SA11A1.7669
City State Zip Code Miami Beach FL 33154	Amount of Each Receipt this Period 33.50	
FEC ID number of contributing federal political committee. <b>C</b>		In-kind - FedEx Charge
Name of Employer Gus Machado Enterprises	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gus Machado		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 5055 Collins Avenue Unit 3N		<b>Transaction ID:</b> SA11A1.7662
City State Zip Code Miami Beach FL 33154	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		In-kind - Rent
Name of Employer Gus Machado Enterprises	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 467.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gus Machado		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address 5055 Collins Avenue Unit 3N		<b>Transaction ID:</b> SA11A1.7672
City State Zip Code Miami Beach FL 33154	Amount of Each Receipt this Period 33.50	
FEC ID number of contributing federal political committee. <b>C</b>		In-kind - FedEx Charge
Name of Employer Gus Machado Enterprises	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	267.00
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Gus Machado		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2006	
Mailing Address 5055 Collins Avenue Unit 3N		Transaction ID: SA11A1.7674	
City State Zip Code Miami Beach FL 33154		Amount of Each Receipt this Period 33.50	
FEC ID number of contributing federal political committee. <b>C</b>		In-kind - FedEx Charge	
Name of Employer Gus Machado Enterprises Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 534.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Gus Machado		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 5055 Collins Avenue Unit 3N		Transaction ID: SA11A1.7665	
City State Zip Code Miami Beach FL 33154		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		In-kind - Rent	
Name of Employer Gus Machado Enterprises Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 734.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Gus Machado		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 5055 Collins Avenue Unit 3N		Transaction ID: SA11A1.7676	
City State Zip Code Miami Beach FL 33154		Amount of Each Receipt this Period 33.50	
FEC ID number of contributing federal political committee. <b>C</b>		In-kind - FedEx Charge	
Name of Employer Gus Machado Enterprises Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 767.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	267.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Emilio F. Martinez		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 11755 S.W. 90th Street #210		<b>Transaction ID:</b> SA11A1.7620
City State Zip Code Miami FL 33186	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Caribe Homes	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Rafael Martinez, Esq.		Date of Receipt M M / D D / Y Y Y Y 01 / 03 / 2006
Mailing Address 1115 Woodland Street		<b>Transaction ID:</b> SA11A1.7546
City State Zip Code Orlando FL 32806	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer McEvan, Martinez & Duker	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Raul Masvidal		Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2006
Mailing Address 201 Alhambra Circle Suite 700		<b>Transaction ID:</b> SA11A1.7555
City State Zip Code Coral Gables FL 33134	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Masvidal Partners	Occupation Managing Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Sergio J. Masvidal		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 6800 S.W. 80th Ave.		Transaction ID: SA11A1.7612	
City State Zip Code Miami FL 33143	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Express Bank, Lt- d.	Occupation Senior Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Luis R. Mola		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6	
Mailing Address 2509 Castilla Isle		Transaction ID: SA11A1.7640	
City State Zip Code Ft. Lauderdale FL 33301	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer DME Corporation	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Mario Murgado		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 7855 S.W. 83rd Court		Transaction ID: SA11A1.7587	
City State Zip Code Miami FL 33143	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Brickell Motors	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Elpidio Nunez

Mailing Address P.O. Box 420497

City State Zip Code  
Miami FL 33142

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

Name of Employer Occupation  
Northwestern Meat, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 6 / 2 0 0 6

Transaction ID: SA11A1.7575

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas O'Connell

Mailing Address 283 Atlantic Isle

City State Zip Code  
Sunny Isles FL 33160

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.7552

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jose O. Padron

Mailing Address 1335 North Venetian Way

City State Zip Code  
Miami FL 33139

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

Name of Employer Occupation  
Piloto Cigars President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.7613

Amount of Each Receipt this Period  
1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Sergio Pino		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 3 / 2 0 0 6	
Mailing Address 7270 N.W. 12th Street Suite 410		<b>Transaction ID:</b> SA11A1.7544	
City State Zip Code Miami FL 33126		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Century Builder's Group, Inc.		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Raul B. Rivera		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 6	
Mailing Address 7880 S.W. 133rd Avenue		<b>Transaction ID:</b> SA11A1.7631	
City State Zip Code Miami FL 33183		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Best Class Insurance Agency		Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Raul E. Rivero		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 4 / 2 0 0 6	
Mailing Address 811 Sunset Road		<b>Transaction ID:</b> SA11A1.7571	
City State Zip Code Coral Gables FL 33143		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ICC		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Carlos J. Rodriguez		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 6
Mailing Address 5105 N.W. 159th Street		Transaction ID: SA11A1.7569
City State Zip Code Miami Lakes FL 33014	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Mason Vitamins	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jorge A. Rodriguez		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 13031 Lerida Street		Transaction ID: SA11A1.7553
City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer La Poderosa Radio	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jose J. Rodriguez		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 34 Clarendon Street		Transaction ID: SA11A1.7633
City State Zip Code Boston MA 02116	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Credit Suisse	Occupation Investment Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Ruben Rodriguez		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 70 Lakeview Drive		<b>Transaction ID:</b> SA11A1.7643
City State Zip Code Fairfield CT 06825	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John Sagarrabay		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2006
Mailing Address 515 S.W. 63rd Court		<b>Transaction ID:</b> SA11A1.7583
City State Zip Code Miami FL 33144	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Platinum Capital Group Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dr. Maria I. Santa Cruz		Date of Receipt M M / D D / Y Y Y Y 01 / 04 / 2006
Mailing Address 3860 West Flagler Street		<b>Transaction ID:</b> SA11A1.7550
City State Zip Code Coral Gables FL 33134	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Owner Institute of Nutrition/Natural Health		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Maria E. Sequeira		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 8510 S.W. 85th Street		<b>Transaction ID:</b> SA11A1.7638	
City State Zip Code Miami FL 33143	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer U.S. Senator Mel Martinez	Occupation Congressional Aide		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> The Advocacy Group at Tew Cardenas, L.L.C.		Date of Receipt M M / D D / Y Y Y Y 01 / 09 / 2006	
Mailing Address 1441 Brickell Avenue 15th Floor		<b>Transaction ID:</b> SA11A1.7560	
City State Zip Code Miami FL 33131	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Eladio Valdes		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address P.O. Box 960158		<b>Transaction ID:</b> SA11A1.7622	
City State Zip Code Miami FL 33296	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Valdes Farms		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Rafael Vazquez		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 3 / 2 0 0 6
Mailing Address 18601 N.W. 62nd Avenue		<b>Transaction ID:</b> SA11A1.7547
City State Zip Code Miami FL 33163	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 750.00
Name of Employer Comcast Cable	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Grisel Ybarra, Esq.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 2320 S.W. 57th Avenue #201		<b>Transaction ID:</b> SA11A1.7600
City State Zip Code Miami FL 33155	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2500.00
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>61992.08</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Americart</b>		Transaction ID: SB21B.7647 Date of Disbursement																					
Mailing Address 12613 Raven Ridge Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	2		2	0	0	6														
City Raleigh	State NC	Zip Code 27614	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website Credit Card Processing		Category/ Type	274.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) <b>B. Biltmore Hotel</b>		Transaction ID: SB21B.7680 Date of Disbursement																					
Mailing Address 1200 Anastasia Avenue		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		3	1		2	0	0	6														
City Coral Gables	State FL	Zip Code 33134	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC-Only Luncheon Expenses		Category/ Type	21730.26																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) <b>C. Mr. Mauricio Claver-Carone, Esq.</b>		Transaction ID: SB21B.7655 Date of Disbursement																					
Mailing Address 2501 M Street, N.W. #608		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		0	9		2	0	0	6														
City Washington	State DC	Zip Code 20037	Amount of Each Disbursement this Period																				
Purpose of Disbursement In-kind - FEC Seminar Costs		Category/ Type	80.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	22084.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Mauricio Claver-Carone, Esq.</b>		<b>Transaction ID: SB21B.7653</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 6
Mailing Address 2501 M Street, N.W. #608		Amount of Each Disbursement this Period 85.92
City Washington State DC Zip Code 20037	Purpose of Disbursement In-kind - Telephone Charges (MCI)	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Mauricio Claver-Carone, Esq.</b>		<b>Transaction ID: SB21B.7659</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 2501 M Street, N.W. #608		Amount of Each Disbursement this Period 92.16
City Washington State DC Zip Code 20037	Purpose of Disbursement In-kind - Telephone Charges (MCI)	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Creation Network</b>		<b>Transaction ID: SB21B.7457</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 6
Mailing Address 5072 N.W. 66th Drive		Amount of Each Disbursement this Period 545.00
City Coral Springs State FL Zip Code 33067	Purpose of Disbursement Graphic Design - Bulletin	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>723.08</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7661</b> Date of Disbursement 01 / 31 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 200.00
City Miami Beach State FL Zip Code 33154	Purpose of Disbursement In-kind - Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7671</b> Date of Disbursement 02 / 24 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 33.50
City Miami Beach State FL Zip Code 33154	Purpose of Disbursement In-kind - FedEx Charge Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7664</b> Date of Disbursement 02 / 28 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 200.00
City Miami Beach State FL Zip Code 33154	Purpose of Disbursement In-kind - Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	433.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7673</b> Date of Disbursement MM / DD / YYYY 03 / 10 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 33.50
City Miami Beach      State FL      Zip Code 33154		
Purpose of Disbursement In-kind - FedEx Charge		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7675</b> Date of Disbursement MM / DD / YYYY 03 / 21 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 33.50
City Miami Beach      State FL      Zip Code 33154		
Purpose of Disbursement In-kind - FedEx Charge		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7666</b> Date of Disbursement MM / DD / YYYY 03 / 31 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 200.00
City Miami Beach      State FL      Zip Code 33154		
Purpose of Disbursement In-kind - Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	267.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Gus Machado</b>		<b>Transaction ID: SB21B.7677</b> Date of Disbursement 03 / 31 / 2006
Mailing Address 5055 Collins Avenue Unit 3N		Amount of Each Disbursement this Period 33.50
City Miami Beach State FL Zip Code 33154	Purpose of Disbursement In-kind - FedEx Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Sandor Video Production</b>		<b>Transaction ID: SB21B.7648</b> Date of Disbursement 03 / 16 / 2006
Mailing Address 8924 West Flagler Street #2		Amount of Each Disbursement this Period 350.00
City Miami State FL Zip Code 33174	Purpose of Disbursement Design and Picture Reproduction Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Saul Laguillo Photography</b>		<b>Transaction ID: SB21B.7645</b> Date of Disbursement 01 / 30 / 2006
Mailing Address 2700 S.W. 36th Avenue		Amount of Each Disbursement this Period 250.00
City Miami State FL Zip Code 33133	Purpose of Disbursement Picture Reproduction Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>633.50</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>24141.34</b>

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. GARY L ACKERMAN</b>		<b>Transaction ID: SB23.7484</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 182-15 Radnor Rd.		Amount of Each Disbursement this Period 3000.00
City JAMAICA State NY Zip Code 11432		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) <b>B. GARY L ACKERMAN</b>		<b>Transaction ID: SB23.7485</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6
Mailing Address 182-15 Radnor Rd.		Amount of Each Disbursement this Period 1000.00
City JAMAICA State NY Zip Code 11432		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) <b>C. ALEXANDER FOR SENATE INC</b>		<b>Transaction ID: SB23.7501</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 228 S WASHINGTON STREET SUITE 115		Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA State VA Zip Code 22314		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. BOREN FOR CONGRESS</b>		<b>Transaction ID: SB23.7535</b> Date of Disbursement
Mailing Address PO BOX 149		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City OKEM	State OK	Zip Code 74859
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: 02	

Full Name (Last, First, Middle Initial) <b>B. CONRAD BURNS</b>		<b>Transaction ID: SB23.7481</b> Date of Disbursement
Mailing Address 768 ASTEROID		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
City BILLINGS	State MT	Zip Code 59105
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT	District: 00	

Full Name (Last, First, Middle Initial) <b>C. CONRAD BURNS</b>		<b>Transaction ID: SB23.7482</b> Date of Disbursement
Mailing Address 768 ASTEROID		<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
City BILLINGS	State MT	Zip Code 59105
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. STEVE CHABOT</b>		<b>Transaction ID: SB23.7532</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address 3014 Harrison Ave.		Amount of Each Disbursement this Period 1000.00	
City Cincinnati State OH Zip Code 45211	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CHANDLER FOR CONGRESS</b>		<b>Transaction ID: SB23.7530</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address PO BOX 12678		Amount of Each Disbursement this Period 1000.00	
City LEXINGTON State KY Zip Code 40583	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CONAWAY FOR CONGRESS</b>		<b>Transaction ID: SB23.7506</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6	
Mailing Address PO Box 51272		Amount of Each Disbursement this Period 1000.00	
City Midland State TX Zip Code 79710	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. HENRY R CUELLAR</b>		<b>Transaction ID: SB23.7463</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 1519 Washington Street 2nd Floor Suite 200		Amount of Each Disbursement this Period 4000.00
City LAREDO State TX Zip Code 78042		
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. DAVID VITTER FOR US SENATE</b>		<b>Transaction ID: SB23.7520</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address PO BOX 8175		Amount of Each Disbursement this Period 1000.00
City METAIRIE State LA Zip Code 70011		
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ARTUR GENESTRE DAVIS</b>		<b>Transaction ID: SB23.7488</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address PO BOX 1845		Amount of Each Disbursement this Period 1000.00
City BIRMINGHAM State AL Zip Code 35201		
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ELIZABETH DOLE COMMITTEE INC</b>		<b>Transaction ID: SB23.7513</b>	
Mailing Address PO BOX 2918		Date of Disbursement MM / DD / YYYY 03 / 10 / 2006	
City RALEIGH	State NC	Zip Code 27602	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NC	District: 00		

Full Name (Last, First, Middle Initial) <b>B. ENGEL FOR CONGRESS</b>		<b>Transaction ID: SB23.7491</b>	
Mailing Address 462 California Road		Date of Disbursement MM / DD / YYYY 02 / 23 / 2006	
City Bronxville	State NY	Zip Code 10708	Amount of Each Disbursement this Period 3000.00
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY	District: 17		

Full Name (Last, First, Middle Initial) <b>C. ENSIGN FOR SENATE</b>		<b>Transaction ID: SB23.7493</b>	
Mailing Address PO BOX 26568		Date of Disbursement MM / DD / YYYY 02 / 24 / 2006	
City LAS VEGAS	State NV	Zip Code 89126	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV	District: 00		

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ENSIGN FOR SENATE</b>		<b>Transaction ID:</b> SB23.7494 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address PO BOX 26568		Amount of Each Disbursement this Period 3000.00	
City LAS VEGAS	State NV		Zip Code 89126
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NV District: 00	

Full Name (Last, First, Middle Initial) <b>B. TOM FEENEY</b>		<b>Transaction ID:</b> SB23.7456 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 6	
Mailing Address 1420 Alafaya Trail #103		Amount of Each Disbursement this Period 2000.00	
City Oviedo	State FL		Zip Code 32765
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 24	

Full Name (Last, First, Middle Initial) <b>C. FITZPATRICK FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.7471 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6	
Mailing Address 115 North Broad Street		Amount of Each Disbursement this Period 2000.00	
City Doylestown	State PA		Zip Code 18901
Purpose of Disbursement			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: PA District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. FITZPATRICK FOR CONGRESS</b>		<b>Transaction ID: SB23.7472</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 115 North Broad Street		Amount of Each Disbursement this Period 1000.00
City Doylestown State PA Zip Code 18901	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FREEDOM PROJECT; THE</b>		<b>Transaction ID: SB23.7515</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 509 7th Street NW Third Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004	Category/ Type	
Purpose of Disbursement		
Candidate Name ALEXANDER FOR SENATE INC		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. GARD FOR CONGRESS</b>		<b>Transaction ID: SB23.7521</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 6
Mailing Address PO BOX 277		Amount of Each Disbursement this Period 1000.00
City GREEN BAY State WI Zip Code 54305	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. GEOFF DAVIS FOR CONGRESS</b>		<b>Transaction ID: SB23.7505</b> Date of Disbursement
Mailing Address 3161 Dixie Highway Suite F		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
City Erlanger	State KY	Zip Code 41018
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY	District: 04	

Full Name (Last, First, Middle Initial) <b>B. GROWTH AND PROSPERITY POLITICAL ACTION COMMITTEE</b>		<b>Transaction ID: SB23.7539</b> Date of Disbursement
Mailing Address 2610 Ridge Road Drive Suite 300		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City Alexandria	State VA	Zip Code 22302
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. JIM JORDAN FOR CONGRESS</b>		<b>Transaction ID: SB23.7528</b> Date of Disbursement
Mailing Address 1709 STATE ROUTE 560 S		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City URBANA	State OH	Zip Code 43078
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 04	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. JO BONNER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.7507</b> Date of Disbursement
Mailing Address P.O. Box 851232		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
City Mobile	State AL	Zip Code 36685
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AL	District: 01	

Full Name (Last, First, Middle Initial) <b>B. JON KYL FOR U S SENATE</b>		<b>Transaction ID: SB23.7461</b> Date of Disbursement
Mailing Address PO BOX 10246		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City PHOENIX	State AZ	Zip Code 85064
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 00	

Full Name (Last, First, Middle Initial) <b>C. PATRICK J KENNEDY</b>		<b>Transaction ID: SB23.7519</b> Date of Disbursement
Mailing Address PO BOX 321		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>
City PAWTUCKET	State RI	Zip Code 02862
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="4000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: RI	District: 01	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. KING FOR CONGRESS</b>		<b>Transaction ID: SB23.7531</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 126 Des Moines Street P.O. Box 576		Amount of Each Disbursement this Period 1000.00
City Odebolt State IA Zip Code 51458		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) <b>B. KUHL FOR CONGRESS</b>		<b>Transaction ID: SB23.7542</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 10 GANESVOORT STREET		Amount of Each Disbursement this Period 1000.00
City BATH State NY Zip Code 14810		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) <b>C. LAMBERTI FOR CONGRESS</b>		<b>Transaction ID: SB23.7510</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address PO BOX 785		Amount of Each Disbursement this Period 1000.00
City ANKENY State IA Zip Code 50021		
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. LATHAM FOR CONGRESS</b>		<b>Transaction ID: SB23.7512</b> Date of Disbursement 03 / 10 / 2006
Mailing Address PO Box 71 PO BOX 71		Amount of Each Disbursement this Period 1000.00
City Clarion State IA Zip Code 50525	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. JOSEPH I LIEBERMAN</b>		<b>Transaction ID: SB23.7526</b> Date of Disbursement 03 / 27 / 2006
Mailing Address PO BOX 231294 STATE HOUSE SQUARE		Amount of Each Disbursement this Period 5000.00
City HARTFORD State CT Zip Code 06123	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. CONNIE MACK</b>		<b>Transaction ID: SB23.7490</b> Date of Disbursement 02 / 21 / 2006
Mailing Address 5100 S. Cleveland Ave. Suite 318 PMB 388		Amount of Each Disbursement this Period 1000.00
City Fort Myers State FL Zip Code 33907	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 14	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 48

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. MALONEY FOR CONGRESS</b>		<b>Transaction ID: SB23.7536</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 49 EAST 92ND STREET		Amount of Each Disbursement this Period 1000.00
City NEW YORK State NY Zip Code 10128	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 14	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MARK KENNEDY 06</b>		<b>Transaction ID: SB23.7503</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address PO BOX 49333		Amount of Each Disbursement this Period 1000.00
City BLAINE State MN Zip Code 55449	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. CATHY MCMORRIS</b>		<b>Transaction ID: SB23.7466</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address PO BOX 555		Amount of Each Disbursement this Period 1000.00
City COLVILLE State WA Zip Code 99114	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. CATHY MCMORRIS</b>		<b>Transaction ID: SB23.7467</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6
Mailing Address PO BOX 555		Amount of Each Disbursement this Period 3000.00
City COLVILLE State WA Zip Code 99114		
Purpose of Disbursement Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CHARLIE JR MELANCON</b>		<b>Transaction ID: SB23.7489</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address PO Box 549 PO BOX 549		Amount of Each Disbursement this Period 1000.00
City Napoleonville State LA Zip Code 70390		
Purpose of Disbursement Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MENENDEZ FOR SENATE</b>		<b>Transaction ID: SB23.7459</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 4000.00
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. MIKE MCINTYRE FOR CONGRESS</b>		<b>Transaction ID: SB23.7514</b> Date of Disbursement
Mailing Address P.O. Box 1		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City Lumberton	State NC	Zip Code 28359
Purpose of Disbursement	<input type="text" value="4000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District: 07		

Full Name (Last, First, Middle Initial) <b>B. NATHAN DEAL FOR CONGRESS</b>		<b>Transaction ID: SB23.7518</b> Date of Disbursement
Mailing Address PO BOX 902 PO BOX 902		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>
City GAINESVILLE	State GA	Zip Code 30503
Purpose of Disbursement	<input type="text" value="1500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 10		

Full Name (Last, First, Middle Initial) <b>C. PALLONE FOR CONGRESS</b>		<b>Transaction ID: SB23.7527</b> Date of Disbursement
Mailing Address PO BOX 3176		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City LONG BRANCH	State NJ	Zip Code 07740
Purpose of Disbursement	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. PASCRELL FOR CONGRESS INC.</b>		<b>Transaction ID: SB23.7486</b> Date of Disbursement
Mailing Address POB 640		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City Totowa	State NJ	Zip Code 07511
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: NJ	District: 8	

Full Name (Last, First, Middle Initial) <b>B. PRYCE FOR CONGRESS</b>		<b>Transaction ID: SB23.7464</b> Date of Disbursement
Mailing Address 145 E. Rich Street		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: OH	District: 15	

Full Name (Last, First, Middle Initial) <b>C. RICHARD BURR COMMITTEE</b>		<b>Transaction ID: SB23.7499</b> Date of Disbursement
Mailing Address POST OFFICE BOX 5928		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City WINSTON-SALEM	State NC	Zip Code 27113
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: NC	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. SCHIFF FOR CONGRESS</b>		<b>Transaction ID: SB23.7497</b> Date of Disbursement
Mailing Address 777 S. Figueroa St. Suite 4050		<input type="text" value="03"/> <input type="text" value="06"/> / <input type="text" value="2006"/>
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 29	

Full Name (Last, First, Middle Initial) <b>B. SCHIFF FOR CONGRESS</b>		<b>Transaction ID: SB23.7498</b> Date of Disbursement
Mailing Address 777 S. Figueroa St. Suite 4050		<input type="text" value="03"/> <input type="text" value="06"/> / <input type="text" value="2006"/>
City Los Angeles	State CA	Zip Code 90017
Purpose of Disbursement		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 29	

Full Name (Last, First, Middle Initial) <b>C. SCHWARZ FOR CONGRESS</b>		<b>Transaction ID: SB23.7538</b> Date of Disbursement
Mailing Address POST OFFICE BOX 2063		<input type="text" value="03"/> <input type="text" value="31"/> / <input type="text" value="2006"/>
City BATTLE CREEK	State MI	Zip Code 49016
Purpose of Disbursement		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. SIMMONS FOR CONGRESS</b>		<b>Transaction ID: SB23.7534</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 268 Drawer 271 P.O. Box 268 Drawer 271		Amount of Each Disbursement this Period 1000.00
City Stonington State CT Zip Code 06378	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. SIRES FOR CONGRESS</b>		<b>Transaction ID: SB23.7524</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 6050 BOULEVARD EAST APT 6B		Amount of Each Disbursement this Period 5000.00
City WEST NEW YORK State NJ Zip Code 07093	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. SORENSEN FOR CONGRESS</b>		<b>Transaction ID: SB23.7508</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address PO BOX 1661		Amount of Each Disbursement this Period 1000.00
City BOISE State ID Zip Code 83701	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. TED POE FOR CONGRESS</b>		Transaction ID: SB23.7473 Date of Disbursement																					
Mailing Address P.O. Box 14222		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	8		2	0	0	6														
City Humble	State TX	Zip Code 77347	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<input type="text"/>	<input type="text" value="3000.00"/>																				
Candidate Name		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: TX	District: 02																						

Full Name (Last, First, Middle Initial) <b>B. TOM DELAY CONGRESSIONAL COMMITTEE</b>		Transaction ID: SB23.7469 Date of Disbursement																					
Mailing Address 7002 Riverbrook Drive Ste. 200		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	3		2	0	0	6														
City Sugar Land	State TX	Zip Code 77479	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<input type="text"/>	<input type="text" value="5000.00"/>																				
Candidate Name		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: TX	District: 22																						

Full Name (Last, First, Middle Initial) <b>C. WALSH FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.7523 Date of Disbursement																					
Mailing Address 306 WINKWORTH PARKWAY		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	1		2	0	0	6														
City SYRACUSE	State NY	Zip Code 13215	Amount of Each Disbursement this Period																				
Purpose of Disbursement		<input type="text"/>	<input type="text" value="1000.00"/>																				
Candidate Name		Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NY	District: 25																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. WHITFIELD FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.7541	
Mailing Address P.O. BOX 391		Date of Disbursement MM / DD / YYYY 03 / 31 / 2006	
City HOPKINSVILLE	State KY	Zip Code 42241	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY District: 01			

Full Name (Last, First, Middle Initial) <b>B. WHITFIELD FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.7543	
Mailing Address P.O. BOX 391		Date of Disbursement MM / DD / YYYY 03 / 31 / 2006	
City HOPKINSVILLE	State KY	Zip Code 42241	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY District: 01			

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

2000.00

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

106500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 48

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

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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** A+ Mini Storage, L.L.C.

Mailing Address 12200 S.W. 117th Avenue

City State Zip Code  
Miami FL 33186

Purpose of Disbursement  
Contribution Refund

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A.7470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 48 / 48	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Biltmore Hotel	Nature of Debt (Purpose): PAC-Only Luncheon Expenses
Mailing Address 1200 Anastasia Avenue	
City State ZIP Code Coral Gables FL 33134	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10.7379</b>	
21730.26		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	21730.26	0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	0.00
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	