

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) P.O. BOX 22945 HIALEAH FL 33002 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00387720 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2018 through 06 / 30 / 2018

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

Signature of Treasurer RIESCO, JOSE, , , [Electronically Filed] Date 10 / 22 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		175972.08
(b) Cash on Hand at Beginning of Reporting Period.....	156776.98	
(c) Total Receipts (from Line 19)	40000.00	40750.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	196776.98	216722.08
7. Total Disbursements (from Line 31).....	32204.00	52149.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	164572.98	164572.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	40000.00	40750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	40000.00	40750.00
(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)	40000.00	40750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	40000.00	40750.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	40000.00	40750.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1204.00	1649.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1204.00	1649.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31000.00	50500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	32204.00	52149.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32204.00	52149.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	40000.00	40750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40000.00	40750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1204.00	1649.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1204.00	1649.10

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<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

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

A. DIAZ, FAUSTO, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9330 NW 110TH AVENUE

City MIAMI	State FL	Zip Code 33178
---------------	-------------	-------------------

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

Name of Employer (for Individual) ALL AMERICAN CONTAINERS, INC.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2018

Transaction ID : SA11AI.4138

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1 GROVE ISLE DRIVE

City MIAMI	State FL	Zip Code 33133
---------------	-------------	-------------------

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

Name of Employer (for Individual) ALL AMERICAN CONTAINERS, INC.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2018

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period
5000.00

Memo Item

C. DIAZ, ROSA, MARIA, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9330 NNW 110TH AVENUE

City MIAMI	State FL	Zip Code 33178
---------------	-------------	-------------------

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

Name of Employer (for Individual) ALL AMERICAN CONTAINERS, INC.	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2018

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<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

A. HERNANDEZ, RODOLFO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10300 SW 216 STREET
 City MIAMI State FL Zip Code 33190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 12 / 2018**
Transaction ID : SA11AI.4143
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. LEON, BENJAMIN, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 NW 41 STREET
 City DORAL State FL Zip Code 33166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEON MEDICAL CENTER Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 16 / 2018**
Transaction ID : SA11AI.4145
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. MACHADO, GUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 22945
 City HIALEAH State FL Zip Code 33003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) AUTOMOBILE DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 10 / 2018**
Transaction ID : SA11AI.4147
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<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

A. MACHADO, LILIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 W 49 STREET
 City HIALEAH State FL Zip Code 33012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELF-EMPLOYED Occupation (for Individual) ADVERTISEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 10 / 2018**
Transaction ID : SA11AI.4149
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. PONCE, ANOLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 ISLA DORADA BLVD
 City CORAL GABLES State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 16 / 2018**
Transaction ID : SA11AI.4151
 Amount of Each Receipt this Period 5000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	40000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

A. BURNETTE SOLUTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 12903 ENTRADA AVENUE

City ORLANDO State FL Zip Code 32837

Purpose of Disbursement
PAC ONLY: WEBSITE MAINTENANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4153

Amount of Each Disbursement this Period: 990.00

Memo Item

B. U.S. POSTAL SERVICE

Full Name (Last, First, Middle Initial)

Mailing Address 2200 NW 72ND AVENUE

City MIAMI State FL Zip Code 33152

Purpose of Disbursement
PAC-ONLY: POST OFFICE BOX EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 06 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4155

Amount of Each Disbursement this Period: 214.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1204.00
TOTAL This Period (last page this line number only).....▶	1204.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. GONZALEZ, JULIO, , ,		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018
Mailing Address 217 BAYSIDE DRIVE		FEC Identification Number C H8FL17046 Transaction ID : SB23.4158 Amount of Each Disbursement this Period 2500.00
City VENICE	State FL	
Zip Code 34285	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 17	

Full Name (Last, First, Middle Initial) B. MENENDEZ VICTORY FUND		Date of Disbursement MM / DD / YYYY 04 / 18 / 2018
Mailing Address PO BOX 32248		FEC Identification Number C C00479501 Transaction ID : SB23.4160 Amount of Each Disbursement this Period 10000.00
City NEWARK	State NJ	
Zip Code 07102	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. MOONEY, ALEXANDER XAVIER, , ,		Date of Disbursement MM / DD / YYYY 04 / 04 / 2018
Mailing Address PO BOX 669		FEC Identification Number C H2MD06179 Transaction ID : SB23.4162 Amount of Each Disbursement this Period 1000.00
City FREDERICK	State MD	
Zip Code 21705	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 06	

SUBTOTAL of Disbursements This Page (optional).....▶	13500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)		PAGE 11 OF 12		
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. WALTERS, MIMI, , ,		Date of Disbursement MM / DD / YYYY 04 / 27 / 2018
Mailing Address 9070 IRVINE CENTER DRIVE APT 150		FEC Identification Number C H4CA45097 Transaction ID : SB23.4164 Amount of Each Disbursement this Period 5000.00
City IRVINE	State CA	
Purpose of Disbursement		Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 45	

Full Name (Last, First, Middle Initial) B. WASSERMAN SCHULTZ, DEBBIE, , ,		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 1071 TWIN BRANCH LN		FEC Identification Number C H4FL20023 Transaction ID : SB23.4166 Amount of Each Disbursement this Period 5000.00
City WESTON	State FL	
Purpose of Disbursement		Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL	District: 23	

Full Name (Last, First, Middle Initial) C. WASSERMAN SCHULTZ, DEBBIE, , ,		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 1071 TWIN BRANCH LN		FEC Identification Number C H4FL20023 Transaction ID : SB23.4168 Amount of Each Disbursement this Period 5000.00
City WESTON	State FL	
Purpose of Disbursement		Memo Item <input type="checkbox"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 23	

SUBTOTAL of Disbursements This Page (optional)..... ▶	15000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE

A. YOHO, THEODORE SCOTT, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
06 / 25 / 2018

Mailing Address 5745 SW 75TH STREET, #283

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement: Category/Type

Candidate Name

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

State: FL District: 03

FEC Identification Number: C H2FL06109
Transaction ID : SB23.4169
Amount of Each Disbursement this Period: 2500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement: Category/Type

Candidate Name

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement: Category/Type

Candidate Name

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	31000.00