



**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	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		108547.69
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	108547.69									
(c) Total Receipts (from Line 19) .....	181328.75	181328.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	289876.44	289876.44								
7. Total Disbursements (from Line 31) .....	192693.26	192693.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	97183.18	97183.18								
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

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	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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) .....	178109.50	178109.50
(ii) Unitemized .....	1219.25	1219.25
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	179328.75	179328.75
(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) .....	179328.75	179328.75
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 .....	2000.00	2000.00
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)) .....	181328.75	181328.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	181328.75	181328.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	48193.26	48193.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	48193.26	48193.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	144500.00	144500.00
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 .....	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.....	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))..	192693.26	192693.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	192693.26	192693.26

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	179328.75	179328.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	179328.75	179328.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48193.26	48193.26
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	48193.26	48193.26

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 81

(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

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.**

Full Name (Last, First, Middle Initial)  
Mr. Pedro Adrian

Mailing Address 350 S. Hibiscus Drive

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Occupation  
Adrian Homes General Contractor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.12837

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Antonio Alamo

Mailing Address 85 Ventana Canyon Drive

City State Zip Code  
Las Vegas NV 89113

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

Name of Employer Occupation  
Mandalay Resort Group Senior Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.12901

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Antonio Alamo

Mailing Address 85 Ventana Canyon Drive

City State Zip Code  
Las Vegas NV 89113

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

Name of Employer Occupation  
Mandalay Resort Group Senior Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.13080

Amount of Each Receipt this Period

1000.00

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

4000.00

**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: PAGE 7 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Nelson J. Albareda

Mailing Address 7020 S.W. 82nd Ave.

City State Zip Code  
Miami FL 33143

FEC ID number of contributing federal political committee. C

Name of Employer: Eventus Marketing, Inc. Occupation: Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 01 / 06 / 2009  
**Transaction ID:** SA11AI.12834  
 Amount of Each Receipt this Period: 2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Cesar L. Alvarez

Mailing Address 1221 Brickell Avenue

City State Zip Code  
Miami FL 33131

FEC ID number of contributing federal political committee. C

Name of Employer: Greenberg Traurig, L.L.P. Occupation: Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 06 / 2009  
**Transaction ID:** SA11AI.12838  
 Amount of Each Receipt this Period: 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Maximo Alvarez

Mailing Address 1650 N.W. 87th Ave.

City State Zip Code  
Miami FL 33172

FEC ID number of contributing federal political committee. C

Name of Employer: Sunshine Gasoline Distributors Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 01 / 06 / 2009  
**Transaction ID:** SA11AI.12844  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 10000.00

**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: PAGE 8 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Jorge Arrizurieta

Mailing Address 1118 Placetas Avenue

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
Akerman Senterfitt, L.L.P. Trade Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12848

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Antonio Barcelo

Mailing Address 41774 Carleton Way

City State Zip Code  
Temecula CA 92591

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

Name of Employer Occupation  
Barcelo Nurseries President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2009

**Transaction ID:** SA11AI.12920

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Douglas Beller

Mailing Address 401 E. Las Olas Blvd.  
#1101

City State Zip Code  
Ft. Lauderdale FL 33301

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

Name of Employer Occupation  
CCS, Beller, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 26 / 2009

**Transaction ID:** SA11AI.12881

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**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: PAGE 9 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Douglas Beller</p> <p>Mailing Address 401 E. Las Olas Blvd. #1101</p> <p>City State Zip Code Ft. Lauderdale FL 33301</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CCS, Beller, Inc. President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 26 / 2009</span></p> <p><b>Transaction ID:</b> SA11AI.12919</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jose A. Cancio</p> <p>Mailing Address 799 Crandon Blvd. Apt. #307</p> <p>City State Zip Code Key Biscayne FL 33149</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Central Concrete Super Mix President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 11 / 2009</span></p> <p><b>Transaction ID:</b> SA11AI.12926</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Gaston Cantens</p> <p>Mailing Address 11750 SW 29th St.</p> <p>City State Zip Code Miami FL 33175</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Florida Crystals, Corp. Vice-President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">06 / 16 / 2009</span></p> <p><b>Transaction ID:</b> SA11AI.12931</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2250.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 10 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Nestor Carbonell

Mailing Address 25 Stoney Wilde Lane

City State Zip Code  
Greenwich CT 06830

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

Name of Employer Occupation  
Pepsi Corporation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2009

**Transaction ID:** SA11AI.12946

Amount of Each Receipt this Period  
501.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Ana Carbonell Monge

Mailing Address 193 Corydon Drive

City State Zip Code  
Miami Springs FL 33166

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

Name of Employer Occupation  
U.S. Rep. Lincoln Diaz-Ba-lart Chief of Staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12829

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Ana Carbonell Monge

Mailing Address 193 Corydon Drive

City State Zip Code  
Miami Springs FL 33166

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

Name of Employer Occupation  
U.S. Rep. Lincoln Diaz-Ba-lart Chief of Staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2009

**Transaction ID:** SA11AI.12951

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2001.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Carlos Centurion

Mailing Address 2951 South Bayshore Drive  
Suite 605

City Miami State FL Zip Code 33133

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

Name of Employer Self-Employed Occupation Restaurant Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 13 / 2009  
Transaction ID: SA11AI.12905  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles Cobb

Mailing Address 255 Aragon Avenue  
Suite 333

City Coral Gables State FL Zip Code 33134

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

Name of Employer Cobb Partners Occupation Senior Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 26 / 2009  
Transaction ID: SA11AI.12907  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Manuel Coto

Mailing Address 8803 Silkbay Place

City Orlando State FL Zip Code 32827

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

Name of Employer Central FL Veterans Hospital Occupation Urologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 06 / 2009  
Transaction ID: SA11AI.12847  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6500.00

**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  
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FOR LINE NUMBER: PAGE 12 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Carlos Curbelo

Mailing Address 8881 S.W. 85th Street

City State Zip Code  
Miami FL 33173

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

Name of Employer: Capitol Gains, Corp. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 01 / 06 / 2009  
Transaction ID: SA11AI.12830  
Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Carlos Curbelo

Mailing Address 8881 S.W. 85th Street

City State Zip Code  
Miami FL 33173

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

Name of Employer: Capitol Gains, Corp. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 06 / 10 / 2009  
Transaction ID: SA11AI.12925  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Henry H. Dewhurst

Mailing Address 12202 SW 108th Court

City State Zip Code  
Miami FL 33176

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

Name of Employer: M-DCPS Occupation: Educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 23 / 2009  
Transaction ID: SA11AI.12879  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

**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: PAGE 13 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Myra Dewhurst

Mailing Address 12202 SW 108th Court

City State Zip Code  
Miami FL 33176

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

Name of Employer Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 23 / 2009

Transaction ID: SA11AI.12880

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Fausto Diaz, Jr.

Mailing Address 9743 S.W. 57th Street

City State Zip Code  
Miami FL 33173

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

Name of Employer Occupation  
American International Co-ntainers President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

Transaction ID: SA11AI.12857

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Jacqueline Diaz

Mailing Address 1 Grove Isle Drive #204

City State Zip Code  
Miami FL 33133

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2009

Transaction ID: SA11AI.12948

Amount of Each Receipt this Period  
5000.00

**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

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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Jose F. Diaz

Mailing Address 888 Douglas Rd. Apt 602

City State Zip Code  
Coral Gables FL 33134

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

Name of Employer Self-Employed Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2009

**Transaction ID:** SA11AI.12934

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Remedios Diaz-Oliver

Mailing Address 10000 S.W. 30th Street

City State Zip Code  
Miami FL 33165

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

Name of Employer All American Containers Occupation  
All American Containers President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12856

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Diaz Leyva, Esq.

Mailing Address 90 Edwater Drive #1206

City State Zip Code  
Coral Gables FL 33133

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

Name of Employer Self-Employed Occupation  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12833

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5500.00**

**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: PAGE 15 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Gonzalo R. Dorta, Esq.  
Mailing Address 334 Minorca Ave.  
City State Zip Code  
Coral Gables FL 33134  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 01 / 06 / 2009  
Transaction ID: SA11AI.12823  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jose Fanjul, Sr.  
Mailing Address One North Clematis Street Suite 200  
City State Zip Code  
West Palm Beach FL 33401  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Florida Crystals, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 03 / 23 / 2009  
Transaction ID: SA11AI.12896  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jose Fanjul Jr.  
Mailing Address One North Clematis Street Suite 200  
City State Zip Code  
West Palm Beach FL 33401  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Florida Crystals Occupation Senior VP  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 06 / 01 / 2009  
Transaction ID: SA11AI.12921  
Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9000.00  
**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: PAGE 16 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Miguel G. Farra, Esq.  
 Mailing Address 1001 Brickell Bay Drive  
9th Floor  
 City Miami State FL Zip Code 33131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Morrison, Brown, Argiz, PA Occupation Accountant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00  
 Date of Receipt 01 / 06 / 2009  
**Transaction ID:** SA11AI.12826  
 Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mercedes Feuermann  
 Mailing Address 248 W. Rio Alto Rd.  
 City Miami Beach State FL Zip Code 33139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Feuer, Corp. Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00  
 Date of Receipt 01 / 06 / 2009  
**Transaction ID:** SA11AI.12840  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Silvia E. Fortun  
 Mailing Address 255 Cocoplum Rd.  
 City Coral Gables State FL Zip Code 33143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt 01 / 06 / 2009  
**Transaction ID:** SA11AI.12849  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00  
**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: PAGE 17 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Omar Franco

Mailing Address 12823 Dogwood Hills Lane

City State Zip Code  
Fairfax VA 22033

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

Name of Employer Occupation  
Petrizzo & Associates Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2009

**Transaction ID:** SA11AI.12922

Amount of Each Receipt this Period  
800.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Horacio Garcia

Mailing Address 6850 Riviera Drive

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
Garcia Menendez Enterprises President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
04 / 24 / 2009

**Transaction ID:** SA11AI.12900

Amount of Each Receipt this Period  
2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Horacio Garcia

Mailing Address 6850 Riviera Drive

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
Garcia Menéndez Enterprises President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2009

**Transaction ID:** SA11AI.12902

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3300.00**

**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  
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FOR LINE NUMBER: PAGE 18 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Fernando Gavarrete

Mailing Address 4615 Granada Blvd.

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
Heery International Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 09 / 2009

**Transaction ID:** SA11AI.12860

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John M. Gonzalez

Mailing Address 1300 Connecticut Ave., NW #600

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation  
Peck, Madigan, Jones LLP Senior Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2009

**Transaction ID:** SA11AI.12898

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Rainier Gonzalez

Mailing Address 3822 SW 167th Terrace

City State Zip Code  
Miramar FL 33027

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

Name of Employer Occupation  
Pacer Health CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12853

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

**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

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(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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Carlos M. Gutierrez

Mailing Address 3150 South Street, NW  
#1C

City Washington State DC Zip Code 20007

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

Name of Employer Self-Employed Occupation Business Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2009

**Transaction ID:** SA11AI.12947

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Dr. Alberto M. Hernandez

Mailing Address 2000 South Bayshore Drive  
Apt. #64

City Miami State FL Zip Code 33133

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12831

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Dr. Alberto M. Hernandez

Mailing Address 2000 South Bayshore Drive  
Apt. #64

City Miami State FL Zip Code 33133

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

**Transaction ID:** SA11AI.12916

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

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

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
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 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
U.S.-Cuba Democracy Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gregory Hernandez

Mailing Address 11250 60th Court

City State Zip Code  
Pinecrest FL 33156

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

Name of Employer n/a Occupation Law Student

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 26 / 2009  
Transaction ID: SA11AI.12913  
Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mercedes Hernandez

Mailing Address 9350 S.W. 93rd Place

City State Zip Code  
Miami FL 33176

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

Name of Employer Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 12 / 2009  
Transaction ID: SA11AI.12871  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Rodolfo Hernandez

Mailing Address 9350 S.W. 93rd Place

City State Zip Code  
Miami FL 33176

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

Name of Employer Psychcare, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 01 / 12 / 2009  
Transaction ID: SA11AI.12870  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00

**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  
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 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Dr. Alberto J. Herran

Mailing Address 17349 Magnolia Island Blvd.

City State Zip Code  
Clermont FL 34711

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

Name of Employer Self-Employed Occupation  
Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2009

**Transaction ID:** SA11AI.12942

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jose J. Iglesias

Mailing Address 2201 Sunset Drive

City State Zip Code  
Miami FL 33140

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

Name of Employer Specialty Coffee Traders Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12854

Amount of Each Receipt this Period  
500.00

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

Mailing Address 9789 N.W. 45th Lane

City State Zip Code  
Miami FL 33178

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

Name of Employer SFM Servicios, Inc. Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12836

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**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  
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FOR LINE NUMBER: PAGE 22 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. William E. Junkin

Mailing Address 816 N.W. 11th Street  
#405

City Miami State FL Zip Code 33136

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

Name of Employer GLF Construction, Corp. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 09 / 2009  
Transaction ID: SA11AI.12868  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Angel T. Junquera

Mailing Address 4801 Orduna Drive

City Coral Gables State FL Zip Code 33146

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 12 / 2009  
Transaction ID: SA11AI.12894  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Benjamin Leon, III

Mailing Address 9452 S.W. 124th Terrace

City Miami State FL Zip Code 33176

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

Name of Employer Leon Medical Centers Occupation Senior V.P.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 06 / 2009  
Transaction ID: SA11AI.12842  
Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6250.00

**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: PAGE 23 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Benjamin Leon, Jr.  
Mailing Address 630 Leucadendra Drive  
City State Zip Code  
Coral Gables FL 33156  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Leon Medical Centers Occupation Chief Executive Officer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 01 / 23 / 2009  
Transaction ID: SA11AI.12878  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lisa Leon  
Mailing Address 9452 S.W. 124th Terrace  
City State Zip Code  
Miami FL 33176  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 01 / 06 / 2009  
Transaction ID: SA11AI.12843  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Silvia Leon  
Mailing Address 360 Leucadendra Dr.  
City State Zip Code  
Coral Gables FL 33156  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 05 / 06 / 2009  
Transaction ID: SA11AI.12903  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00  
**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: PAGE 24 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Rigoberto Lesteiro

Mailing Address 5401 Collins Ave.  
#1407

City State Zip Code  
Miami Beach FL 33140

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

Name of Employer Tropical Pallets, Inc. Occupation Owner

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 1 / 0 6 / 2 0 0 9

**Transaction ID:** SA11AI.12821

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alain Lopez

Mailing Address 1800 Wilson Blvd.  
#242

City State Zip Code  
Arlington VA 22201

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

Name of Employer Wilmer, Cutler, Pickering Occupation Attorney

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 6 / 0 2 / 2 0 0 9

**Transaction ID:** SA11AI.12923

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gus Machado

Mailing Address 1200 West 49th Street

City State Zip Code  
Hialeah FL 33012

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

Name of Employer Gus Machado Enterprises Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 9

**Transaction ID:** SA11AI.13112

Amount of Each Receipt this Period  
27.50

In-kind - PAC-Only UPS Expense

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2027.50

**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 25 / 81
	<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. Gus Machado	Date of Receipt MM / DD / YYYY 04 / 20 / 2009
	Mailing Address 1200 West 49th Street	<b>Transaction ID:</b> SA11AI.13114
	City State Zip Code Hialeah FL 33012	Amount of Each Receipt this Period 27.50
	FEC ID number of contributing federal political committee. <b>C</b>	In-kind - PAC-Only UPS Expense
	Name of Employer Occupation Gus Machado Enterprises President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Gus Machado	Date of Receipt MM / DD / YYYY 05 / 06 / 2009
	Mailing Address 1200 West 49th Street	<b>Transaction ID:</b> SA11AI.13116
	City State Zip Code Hialeah FL 33012	Amount of Each Receipt this Period 27.50
	FEC ID number of contributing federal political committee. <b>C</b>	In-kind - PAC-Only UPS Expense
	Name of Employer Occupation Gus Machado Enterprises President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gus Machado	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 1200 West 49th Street	<b>Transaction ID:</b> SA11AI.13118
	City State Zip Code Hialeah FL 33012	Amount of Each Receipt this Period 27.50
	FEC ID number of contributing federal political committee. <b>C</b>	In-kind - PAC-Only UPS Expense
	Name of Employer Occupation Gus Machado Enterprises President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 298.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>82.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 26 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Gus Machado

Mailing Address 1200 West 49th Street

City State Zip Code  
Hialeah FL 33012

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

Name of Employer Occupation  
Gus Machado Enterprises President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 326.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	0	9

**Transaction ID:** SA11AI.13120

Amount of Each Receipt this Period  
27.50

In-kind - PAC-Only UPS Ex-  
pense

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gus Machado

Mailing Address 1200 West 49th Street

City State Zip Code  
Hialeah FL 33012

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

Name of Employer Occupation  
Gus Machado Enterprises President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 353.50

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	0	9

**Transaction ID:** SA11AI.13122

Amount of Each Receipt this Period  
27.50

In-kind - PAC-Only UPS Ex-  
pense

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gus Machado

Mailing Address 1200 West 49th Street

City State Zip Code  
Hialeah FL 33012

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

Name of Employer Occupation  
Gus Machado Enterprises President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 381.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	0	9

**Transaction ID:** SA11AI.13124

Amount of Each Receipt this Period  
27.50

In-kind - PAC-Only UPS Ex-  
pense

**SUBTOTAL** of Receipts This Page (optional) ..... ► **82.50**

**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 27 / 81
	<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. Marcos Marchena, Esq.

Mailing Address 8535 Chickasaw Farms Lane

City State Zip Code  
Orlando FL 32825

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

Name of Employer Occupation  
Marchena & Graham P.A. Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12954

Amount of Each Receipt this Period  
2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Dr. Rosa M. Marin

Mailing Address 115 S.E. 4th Street

City State Zip Code  
Boynton Beach FL 33435

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12850

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Maria C. Martell

Mailing Address 3681 S.W. 1st Ave.

City State Zip Code  
Miami FL 33145

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

Name of Employer Occupation  
Air Breeze Air Conditioning Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2009

**Transaction ID:** SA11AI.12888

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**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: PAGE 28 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Nieves Mayo

Mailing Address 13050 Mar Street

City State Zip Code  
Coral Gables FL 33156

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

**Transaction ID:** SA11AI.12909

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ricardo Mayo Alvarez

Mailing Address 13050 Mar Street

City State Zip Code  
Coral Gables FL 33156

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

Name of Employer Occupation  
Doral Pharmamedics, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12839

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Morrison, Brown, Argiz and Farra LLP

Mailing Address 1001 Brickell Bay Drive  
9th Floor

City State Zip Code  
Miami FL 33131

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2009

**Transaction ID:** SA11AI.13126

Amount of Each Receipt this Period  
500.00

In-kind - PAC-Only Accounting Services

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **6000.00**

**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: PAGE 29 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial) Morrison, Brown, Argiz and Farra LLP		Date of Receipt MM / DD / YYYY 06 / 30 / 2009
Mailing Address 1001 Brickell Bay Drive 9th Floor		Transaction ID: SA11AI.13128
City Miami	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	In-kind - PAC-Only Accounting Services
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Fernando Munilla		Date of Receipt MM / DD / YYYY 01 / 16 / 2009
Mailing Address 5846 S.W. 81 Street		Transaction ID: SA11AI.12874
City Miami	State FL	Zip Code 33143
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer MCM Corporation	Occupation General Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Jorge Munilla		Date of Receipt MM / DD / YYYY 01 / 16 / 2009
Mailing Address 7231 Sunset Drive		Transaction ID: SA11AI.12872
City Miami	State FL	Zip Code 33143
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer MCM Corporation	Occupation General Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 30 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Juan Munilla

Mailing Address 6030 SW 114th Street

City State Zip Code  
Miami FL 33156

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

Name of Employer Occupation  
MCM Corporation Sr. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 16 / 2009

**Transaction ID:** SA11AI.12873

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Madeleine Munilla

Mailing Address 7277 Sunset Drive

City State Zip Code  
Miami FL 33143

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 16 / 2009

**Transaction ID:** SA11AI.12876

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Madeleine Munilla

Mailing Address 7277 Sunset Drive

City State Zip Code  
Miami FL 33143

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

Name of Employer Occupation  
n/a Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2009

**Transaction ID:** SA11AI.12928

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

**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: PAGE 31 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Pedro Munilla

Mailing Address 7277 Sunset Drive

City State Zip Code  
Miami FL 33143

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

Name of Employer MCM Construction      Occupation General Contractor

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	9

**Transaction ID:** SA11AI.12875

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Pedro Munilla

Mailing Address 7277 Sunset Drive

City State Zip Code  
Miami FL 33143

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

Name of Employer MCM Construction      Occupation General Contractor

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	9

**Transaction ID:** SA11AI.12927

Amount of Each Receipt this Period  
3000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mario Murgado

Mailing Address 7855 S.W. 83rd Court

City State Zip Code  
Miami FL 33143

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

Name of Employer Brickell Motors      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	6	/	2	0	0	9

**Transaction ID:** SA11AI.12859

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

**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: PAGE 32 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial) Ms. Ana V. Navarro		Date of Receipt MM / DD / YYYY 05 / 26 / 2009
Mailing Address 700 Biltmore Way #510		<b>Transaction ID:</b> SA11AI.12918
City Coral Gables	State FL	Zip Code 33134
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Political Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Jose M. Nessi		Date of Receipt MM / DD / YYYY 01 / 09 / 2009
Mailing Address 16313 S.W. 44th Street		<b>Transaction ID:</b> SA11AI.12864
City Miami	State FL	Zip Code 33185
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer H.J. Ross	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Carlos Nunez		Date of Receipt MM / DD / YYYY 01 / 06 / 2009
Mailing Address 1551 Bird Road		<b>Transaction ID:</b> SA11AI.12846
City Coral Gables	State FL	Zip Code 33146
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Leon Medical Centers	Occupation Senior Vice President	
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) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Carlos Nunez

Mailing Address 1551 Bird Road

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Leon Medical Centers Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.12906

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Ramiro Ortiz

Mailing Address 7250 S.W. 99th Street

City State Zip Code  
Miami FL 33176

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

Name of Employer Bank United Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

Transaction ID: SA11AI.12908

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Eric Padron

Mailing Address 188 Isla Dorada Blvd.

City State Zip Code  
Coral Gables FL 33143

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

Transaction ID: SA11AI.12917

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**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: PAGE 34 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Jordan Paul

Mailing Address 1762 Willard Street, N.W.

City Washington State DC Zip Code 20009

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

Name of Employer Moroccan American Center Occupation Director, Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2009  
Transaction ID: SA11AI.12950  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Carlos A. Penin

Mailing Address 6410 Granada Blvd.

City Coral Gables State FL Zip Code 33146

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

Name of Employer CAS Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 06 / 2009  
Transaction ID: SA11AI.12832  
Amount of Each Receipt this Period 2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Carlos A. Penin

Mailing Address 6410 Granada Blvd.

City Coral Gables State FL Zip Code 33146

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

Name of Employer CAS Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 05 / 06 / 2009  
Transaction ID: SA11AI.12904  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

**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: PAGE 35 / 81  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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.**

Full Name (Last, First, Middle Initial)  
Mr. Javier Perez-Abreu, Esq.

Mailing Address 936 Coral Way

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
Perez-Abreu P.A. Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2009

**Transaction ID:** SA11AI.12890

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Sergio Pino

Mailing Address 7270 N.W. 12th Street Suite 410

City State Zip Code  
Miami FL 33126

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

Name of Employer Occupation  
Century Builder's Group, Inc. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12824

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Anolan Ponce

Mailing Address 188 Isla Dorada Drive

City State Zip Code  
Coral Gables FL 33143

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

Name of Employer Occupation  
MGR Real Estate Commercial Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2009

**Transaction ID:** SA11AI.12915

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

**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: PAGE 36 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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.** Full Name (Last, First, Middle Initial)  
Mrs. Anolan Ponce

Mailing Address 188 Isla Dorada Drive

City State Zip Code  
Coral Gables FL 33143

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

Name of Employer Occupation  
MGR Real Estate Commercial Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3366.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2009

**Transaction ID:** SA11AI.12935

Amount of Each Receipt this Period  
2866.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mario Prieto

Mailing Address 6532 The Landing Drive

City State Zip Code  
Orlando FL 32812

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

Name of Employer Occupation  
Capri Builders CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12825

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Claudia Puig

Mailing Address 445 Grand Bay Drive  
Apt. #411

City State Zip Code  
Key Biscayne FL 33149

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

Name of Employer Occupation  
Univision Communications Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2009

**Transaction ID:** SA11AI.12827

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5366.00**

**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: PAGE 37 / 81  
(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

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.** Full Name (Last, First, Middle Initial)  
Mrs. Ana Pujals, Esq.  
Mailing Address 1722 Country Club Prado  
City State Zip Code  
Coral Gables FL 33134  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt MM / DD / YYYY 06 / 16 / 2009  
Transaction ID: SA11AI.12932  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Victor Pujals  
Mailing Address 1915 Brickell Avenue Apt. 401-C  
City State Zip Code  
Miami FL 33129  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CDM, Corp. Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt MM / DD / YYYY 01 / 21 / 2009  
Transaction ID: SA11AI.12877  
Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Victor Pujals  
Mailing Address 1915 Brickell Avenue Apt. 401-C  
City State Zip Code  
Miami FL 33129  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CDM, Corp. Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt MM / DD / YYYY 02 / 11 / 2009  
Transaction ID: SA11AI.12892  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00  
**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: PAGE 38 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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.** Full Name (Last, First, Middle Initial)  
Mr. Victor Pujals

Mailing Address 1915 Brickell Avenue  
Apt. 401-C

City Miami State FL Zip Code 33129

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

Name of Employer CDM, Corp. Occupation Engineer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 1 1 / 2 0 0 9

**Transaction ID:** SA11AI.12893

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Victor Pujals

Mailing Address 1915 Brickell Avenue  
Apt. 401-C

City Miami State FL Zip Code 33129

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

Name of Employer CDM, Corp. Occupation Engineer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 6 / 2 0 0 9

**Transaction ID:** SA11AI.12912

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Alberto Recio

Mailing Address 400 N. Flagler Drive

City West Palm Beach State FL Zip Code 33401

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

Name of Employer Florida Crystals, Corp. Occupation Executive

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 6 / 1 6 / 2 0 0 9

**Transaction ID:** SA11AI.12929

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**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: PAGE 39 / 81  
(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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Osmando Sanchez

Mailing Address 6810 Gratian Street

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
Overseas Systems Corporation President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.12858

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Roberto Sanchez

Mailing Address 1790 Bay Drive

City State Zip Code  
Miami Beach FL 33141

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

Name of Employer Occupation  
Health Care Consulting Service President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.12852

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Justin Sayfie, Esq.

Mailing Address 450 East Las Olas Blvd.  
#700

City State Zip Code  
Ft. Lauderdale FL 33301

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

Name of Employer Occupation  
Blosser & Sayfie Attorney

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 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.12828

Amount of Each Receipt this Period

500.00

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

4500.00

**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: PAGE 40 / 81  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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. Roberto Sequeira

Mailing Address 8510 SW 85 Street

City Miami State FL Zip Code 33143

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

Name of Employer Sequeira & Gavarrete Occupation Arquitect

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 01 / 09 / 2009  
**Transaction ID: SA11AI.12862**  
 Amount of Each Receipt this Period: 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Roberto Sequeira

Mailing Address 8510 SW 85 Street

City Miami State FL Zip Code 33143

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

Name of Employer Sequeira & Gavarrete Occupation Arquitect

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 26 / 2009  
**Transaction ID: SA11AI.12911**  
 Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Diego Suarez

Mailing Address 3690 N.W. 62nd Street

City Miami State FL Zip Code 33147

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

Name of Employer Interamerican Transport Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 26 / 2009  
**Transaction ID: SA11AI.12910**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**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: PAGE 41 / 81

(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

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Concepcion Valderrama

Mailing Address 12960 S.W. 103rd Terrace

City State Zip Code  
Miami FL 33186

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.12866

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Mariano Valle

Mailing Address 15476 NW 77 Ct.  
#180

City State Zip Code  
Hialeah FL 33016

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

Name of Employer Occupation  
Self-Employed Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.12863

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)

Eduardo Zayas-Bazan

Mailing Address 7540 SW 52nd Court

City State Zip Code  
Miami FL 33143

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

Name of Employer Occupation  
n/a Retired

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 6 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.12952

Amount of Each Receipt this Period  
500.00

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

1000.00

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

178109.50

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 81  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
SALAZAR FOR SENATE

Mailing Address 1100 BANNOCK STREET

City State Zip Code  
DENVER CO 80204

FEC ID number of contributing federal political committee. **C** C00397679

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 9

Transaction ID: SA16.13082

Amount of Each Receipt this Period  
2000.00

Contribution Refund

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2000.00

**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 43 / 81

<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

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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) 12th Avenue Graphics</p> <p>Mailing Address 1300 N.W. 29th Street</p> <p>City Miami State FL Zip Code 33142</p> <p>Purpose of Disbursement PAC-Only Printing and Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13090</p> <p>Date of Disbursement 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 791.80</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) 12th Avenue Graphics</p> <p>Mailing Address 1300 N.W. 29th Street</p> <p>City Miami State FL Zip Code 33142</p> <p>Purpose of Disbursement PAC-Only Printing and Materials</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13091</p> <p>Date of Disbursement 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 103.79</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Biltmore Hotel</p> <p>Mailing Address 1200 Anastasia Avenue</p> <p>City Coral Gables State FL Zip Code 33134</p> <p>Purpose of Disbursement PAC-Only Fundraising Event Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13094</p> <p>Date of Disbursement 01 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 35673.00</p>

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

**36568.59**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Biltmore Hotel  Mailing Address 1200 Anastasia Avenue  City Coral Gables State FL Zip Code 33134  Purpose of Disbursement PAC-Only Fundraising Event Expense 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) ▼	<b>Transaction ID:</b> SB21B.13095 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 487.62
<b>B.</b>	Full Name (Last, First, Middle Initial) Biltmore Hotel  Mailing Address 1200 Anastasia Avenue  City Coral Gables State FL Zip Code 33134  Purpose of Disbursement PAC-Only Fundraising Event Expense 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) ▼	<b>Transaction ID:</b> SB21B.13096 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 137.05
<b>C.</b>	Full Name (Last, First, Middle Initial) Burnette Solutions  Mailing Address 12903 Entrada Avenue  City Orlando State FL Zip Code 32837  Purpose of Disbursement PAC-Only Website Maintenance 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) ▼	<b>Transaction ID:</b> SB21B.13100 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 297.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	921.67
<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 45 / 81

<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Burnette Solutions  Mailing Address 12903 Entrada Avenue  City Orlando State FL Zip Code 32837  Purpose of Disbursement PAC-Only Website Maintenance 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) ▼	Transaction ID: SB21B.13101 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 9  Amount of Each Disbursement this Period 198.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Mauricio Claver-Carone, Esq.  Mailing Address 2501 M Street, N.W. #608  City Washington State DC Zip Code 20037  Purpose of Disbursement PAC-Only Consulting Fee 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) ▼	Transaction ID: SB21B.13092 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 9  Amount of Each Disbursement this Period 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Creation Network  Mailing Address 5072 N.W. 66th Drive  City Coral Springs State FL Zip Code 33067  Purpose of Disbursement PAC-Only Graphic Design 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) ▼	Transaction ID: SB21B.13089 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9  Amount of Each Disbursement this Period 425.00

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

1623.00

**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 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

A.	Full Name (Last, First, Middle Initial) Eventus Marketing, Inc.	Transaction ID: SB21B.13097 Date of Disbursement MM / DD / YYYY 02 / 04 / 2009
	Mailing Address 5000 S.W. 75th Avenue 4th Floor	Amount of Each Disbursement this Period 5500.00
	City Miami State FL Zip Code 33155	
	Purpose of Disbursement PAC-Only Fundraising Event Entertainment	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) Exotic Orchids & Interior Plants, Corp.	Transaction ID: SB21B.13083 Date of Disbursement MM / DD / YYYY 01 / 12 / 2009
	Mailing Address 21387 S.W. 87th Court	Amount of Each Disbursement this Period 1120.00
	City Miami State FL Zip Code 33189	
	Purpose of Disbursement PAC-Only Fundraising Event Decoration	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Andrew Itkoff	Transaction ID: SB21B.13085 Date of Disbursement MM / DD / YYYY 01 / 21 / 2009
	Mailing Address 1075 101st Street #1	Amount of Each Disbursement this Period 500.00
	City Bay Harbor Island State FL Zip Code 33154	
	Purpose of Disbursement PAC-Only Fundraising Event Photography	Category/ Type
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7120.00
<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)

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Gus Machado</p> <p>Mailing Address 1200 West 49th Street</p> <p>City Hialeah State FL Zip Code 33012</p> <p>Purpose of Disbursement In-kind - PAC-Only UPS Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13113</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Gus Machado</p> <p>Mailing Address 1200 West 49th Street</p> <p>City Hialeah State FL Zip Code 33012</p> <p>Purpose of Disbursement In-kind - PAC-Only UPS Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13115</p> <p>Date of Disbursement 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Gus Machado</p> <p>Mailing Address 1200 West 49th Street</p> <p>City Hialeah State FL Zip Code 33012</p> <p>Purpose of Disbursement In-kind - PAC-Only UPS Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13117</p> <p>Date of Disbursement 05 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p>

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

82.50

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Gus Machado</p> <p>Mailing Address 1200 West 49th Street</p> <p>City Hialeah State FL Zip Code 33012</p> <p>Purpose of Disbursement In-kind - PAC-Only UPS Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13119</p> <p>Date of Disbursement 05 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Gus Machado</p> <p>Mailing Address 1200 West 49th Street</p> <p>City Hialeah State FL Zip Code 33012</p> <p>Purpose of Disbursement In-kind - PAC-Only UPS Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13121</p> <p>Date of Disbursement 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Gus Machado</p> <p>Mailing Address 1200 West 49th Street</p> <p>City Hialeah State FL Zip Code 33012</p> <p>Purpose of Disbursement In-kind - PAC-Only UPS Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.13123</p> <p>Date of Disbursement 06 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 27.50</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>82.50</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)

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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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Gus Machado  Mailing Address 1200 West 49th Street  City Hialeah State FL Zip Code 33012  Purpose of Disbursement In-kind - PAC-Only UPS Expense  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) ▼	<b>Transaction ID:</b> SB21B.13125 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 27.50
<b>B.</b>	Full Name (Last, First, Middle Initial) Morrison, Brown, Argiz and Farra LLP  Mailing Address 1001 Brickell Bay Drive 9th Floor  City Miami State FL Zip Code 33131  Purpose of Disbursement In-kind - PAC-Only Accounting Services  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) ▼	<b>Transaction ID:</b> SB21B.13127 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Morrison, Brown, Argiz and Farra LLP  Mailing Address 1001 Brickell Bay Drive 9th Floor  City Miami State FL Zip Code 33131  Purpose of Disbursement In-kind - PAC-Only Accounting Services  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) ▼	<b>Transaction ID:</b> SB21B.13129 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 9	<b>Amount of Each Disbursement this Period</b> 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1027.50</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)

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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

A.

Full Name (Last, First, Middle Initial)

Mrs. Asela Torres

Mailing Address 1621 S.W. 14th Terrace

City State Zip Code  
Miami FL 33145

Purpose of Disbursement  
PAC-Only Fundraising Event Photography

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.13087

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

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

300.00

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

47725.76

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) GARY L ACKERMAN</p> <p>Mailing Address 182-15 Radnor Rd.</p> <p>City JAMAICA State NY Zip Code 11432</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13031</p> <p>Date of Disbursement <input type="text"/> 05 / <input type="text"/> 07 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) JOHN H ADLER</p> <p>Mailing Address 51 CAMEO DRIVE</p> <p>City CHERRY HILL State NJ Zip Code 08003</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12979</p> <p>Date of Disbursement <input type="text"/> 02 / <input type="text"/> 25 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JOHN H ADLER</p> <p>Mailing Address 51 CAMEO DRIVE</p> <p>City CHERRY HILL State NJ Zip Code 08003</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13077</p> <p>Date of Disbursement <input type="text"/> 06 / <input type="text"/> 22 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>

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

**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

A.	Full Name (Last, First, Middle Initial) <b>JASON ALTMIRE</b>	<b>Transaction ID:</b> SB23.12957
	Mailing Address 8190 STREAMSIDE DRIVE	Date of Disbursement 02 / 02 / 2009
	City PITTSBURGH State PA Zip Code 15237	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>MICHAEL A ARCURI</b>	<b>Transaction ID:</b> SB23.12989
	Mailing Address PO Box 8508	Date of Disbursement 02 / 25 / 2009
	City Utica State NY Zip Code 13505	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>MICHAEL A ARCURI</b>	<b>Transaction ID:</b> SB23.13059
	Mailing Address PO Box 8508	Date of Disbursement 06 / 05 / 2009
	City Utica State NY Zip Code 13505	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**3000.00**

**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"/> 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) <b>JOE BACA</b></p> <p>Mailing Address 201 North E Street Suite 102</p> <p>City San Bernardino State CA Zip Code 92401</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 43</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13019</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <input type="text" value="2500.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) <b>JOHN J BARROW</b></p> <p>Mailing Address PO Box 48178</p> <p>City Athens State GA Zip Code 30606</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12990</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) <b>MELISSA LUBURICH BEAN</b></p> <p>Mailing Address 203 FRANCES LANE</p> <p>City BARRINGTON State IL Zip Code 60010</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13016</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4500.00"/>
<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

A.	Full Name (Last, First, Middle Initial) JOHN A BOCCIERI	Transaction ID: SB23.13010 Date of Disbursement																			
	Mailing Address 9830 GINGER HILL CT	<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>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City NEW MIDDLETOWN State OH Zip Code 44442	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) JOHN A BOCCIERI	Transaction ID: SB23.13072 Date of Disbursement																			
	Mailing Address 9830 GINGER HILL CT	<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
	City NEW MIDDLETOWN State OH Zip Code 44442	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) F. ALLEN JR. BOYD	Transaction ID: SB23.13070 Date of Disbursement																			
	Mailing Address P.O. Box 15703	<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>6</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	2		2	0	0	9												
	City Tallahassee State FL Zip Code 32317	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>4000.00</td></tr></table>	4000.00
4000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	





# 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ANH 'JOSEPH' CAO</p> <p>Mailing Address 4371 MURANO ROAD</p> <p>City NEW ORLEANS State LA Zip Code 70129</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13061</p> <p>Date of Disbursement <input type="text"/> 06 / <input type="text"/> 17 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 2000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) RUSS CARNAHAN</p> <p>Mailing Address 3150 ALLEN AVE</p> <p>City ST LOUIS State MO Zip Code 63104</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13027</p> <p>Date of Disbursement <input type="text"/> 04 / <input type="text"/> 24 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) ANDRE CARSON</p> <p>Mailing Address One North Capitol Street #211</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13041</p> <p>Date of Disbursement <input type="text"/> 05 / <input type="text"/> 28 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>

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

# 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) GERRY CONNOLLY</p> <p>Mailing Address PO Box 563</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12983</p> <p>Date of Disbursement <input type="text"/> 02 / <input type="text"/> 25 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) GERRY CONNOLLY</p> <p>Mailing Address PO Box 563</p> <p>City Merrifield State VA Zip Code 22116</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13028</p> <p>Date of Disbursement <input type="text"/> 05 / <input type="text"/> 07 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) KATHLEEN DAHLKEMPER</p> <p>Mailing Address PO BOX 1045</p> <p>City Erie State PA Zip Code 16512</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12981</p> <p>Date of Disbursement <input type="text"/> 02 / <input type="text"/> 25 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>

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

3000.00

**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"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>KATHLEEN DAHLKEMPER</b>  Mailing Address <b>PO BOX 1045</b>  City <b>Erie</b> State <b>PA</b> Zip Code <b>16512</b>  Purpose of Disbursement  Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>PA</b> District: <b>03</b>  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.13076 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <b>06 / 22 / 2009</b>  Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</b>  Mailing Address <b>120 MARYLAND AVENUE NE</b>  City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20002</b>  Purpose of Disbursement  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12994 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <b>03 / 11 / 2009</b>  Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 5px; text-align: center;">15000.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATS WIN SEATS (DWS PAC)</b>  Mailing Address <b>1071 TWIN BRANCH LN</b>  City <b>WESTON</b> State <b>FL</b> Zip Code <b>33326</b>  Purpose of Disbursement  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12993 <b>Date of Disbursement</b> M M / D D / Y Y Y Y <b>03 / 11 / 2009</b>  Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 5px; text-align: center;">5000.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px;">21000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>



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

Use separate schedule(s)  
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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

<p><b>A.</b> Full Name (Last, First, Middle Initial) GABRIELLE GIFFORDS</p> <p>Mailing Address PO BOX 26937</p> <p>City TUCSON State AZ Zip Code 85726</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13079 <b>Date of Disbursement</b> 06 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) KIRSTEN ELIZABETH GILLIBRAND</p> <p>Mailing Address 358 MOUNT MERINO ROAD</p> <p>City HUDSON State NY Zip Code 12534</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12961 <b>Date of Disbursement</b> 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SAMUEL B (SAM) GRAVES</p> <p>Mailing Address 110 SOUTH 10TH STREET</p> <p>City TARKIO State MO Zip Code 64491</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13001 <b>Date of Disbursement</b> 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

**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"/> 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

A.	Full Name (Last, First, Middle Initial) RAYMOND E. 'GENE' GREEN	Transaction ID: SB23.13024
	Mailing Address PO Box 16128	Date of Disbursement 04 / 24 / 2009
	City Houston State TX Zip Code 77222	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 29	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PARKER DR. GRIFFITH	Transaction ID: SB23.13038
	Mailing Address P.O. Box 2916	Date of Disbursement 05 / 28 / 2009
	City Huntsville State AL Zip Code 35804	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DEBORAH 'DEBBIE' HALVORSON	Transaction ID: SB23.13014
	Mailing Address 565 ABERDEEN DRIVE	Date of Disbursement 03 / 26 / 2009
	City CRETE State IL Zip Code 60417	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2010 <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)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 81

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) PHILIP G HARE</p> <p>Mailing Address 3805 44TH ST</p> <p>City ROCK ISLAND State IL Zip Code 61201</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13015 <b>Date of Disbursement</b> 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ALCEE L HASTINGS</p> <p>Mailing Address 2235 RAYBURN OFFICE BUILDING</p> <p>City WASHINGTON State DC Zip Code 20515</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 23</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13054 <b>Date of Disbursement</b> 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MARTIN HEINRICH</p> <p>Mailing Address 2118 CENTRAL AVENUE SE #71 #71</p> <p>City ALBUQUERQUE State NM Zip Code 87106</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12969 <b>Date of Disbursement</b> 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

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





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

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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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>INVEST IN A STRONG AND SECURE AMERICA (ISSA PAC)</b>	<b>Transaction ID:</b> SB23.13056 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 9	
	Mailing Address PO BOX 3799 PO BOX 3799	
City VISTA State CA Zip Code 92085	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>DARRELL ISSA</b>	<b>Transaction ID:</b> SB23.12959 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 9	
	Mailing Address PO BOX 760	
City VISTA State CA Zip Code 92085	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 49	Category/ Type	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>LYNN JENKINS</b>	<b>Transaction ID:</b> SB23.13034 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 9	
	Mailing Address 5940 SW CLARION LANE	
City TOPEKA State KS Zip Code 66610	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 02	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

<p><b>A.</b> Full Name (Last, First, Middle Initial) ANN KIRKPATRICK</p> <p>Mailing Address PO BOX G</p> <p>City FLAGSTAFF State AZ Zip Code 86002</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12975</p> <p>Date of Disbursement <input type="text"/> 02 / <input type="text"/> 25 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ANN KIRKPATRICK</p> <p>Mailing Address PO BOX G</p> <p>City FLAGSTAFF State AZ Zip Code 86002</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13009</p> <p>Date of Disbursement <input type="text"/> 03 / <input type="text"/> 26 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ANN KIRKPATRICK</p> <p>Mailing Address PO BOX G</p> <p>City FLAGSTAFF State AZ Zip Code 86002</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13078</p> <p>Date of Disbursement <input type="text"/> 06 / <input type="text"/> 22 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text"/> 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

A.	Full Name (Last, First, Middle Initial) LARRY W KISSELL	Transaction ID: SB23.12967
	Mailing Address 153 KISSELL DRIVE	Date of Disbursement MM / DD / YYYY 02 / 25 / 2009
	City BISCOE State NC Zip Code 27209	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SUZANNE KOSMAS	Transaction ID: SB23.12977
	Mailing Address 257 Minorca Beach Way	Date of Disbursement MM / DD / YYYY 02 / 25 / 2009
	City New Smyrna Beach State FL Zip Code 32169	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SUZANNE KOSMAS	Transaction ID: SB23.13012
	Mailing Address 257 Minorca Beach Way	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City New Smyrna Beach State FL Zip Code 32169	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <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)

<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

A.	Full Name (Last, First, Middle Initial) <b>SUZANNE KOSMAS</b>	<b>Transaction ID: SB23.13069</b>
	Mailing Address 257 Minorca Beach Way	Date of Disbursement 06 / 22 / 2009
	City New Smyrna Beach State FL Zip Code 32169	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>FRANK M MR. JR KRATOVIL</b>	<b>Transaction ID: SB23.13044</b>
	Mailing Address 222 Main Sail PO Box 518	Date of Disbursement 05 / 28 / 2009
	City Stevensville State MD Zip Code 21666	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>DANIEL WILLIAM LIPINSKI</b>	<b>Transaction ID: SB23.13033</b>
	Mailing Address 4501 GRAND AVENUE	Date of Disbursement 05 / 07 / 2009
	City WESTERN SPRINGS State IL Zip Code 60558	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</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

A.

Full Name (Last, First, Middle Initial)  
BEN R LUJAN

Transaction ID: SB23.12987  
Date of Disbursement

Mailing Address 05 ENTRADA CELEDON Y NESTORA

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	9

City State Zip Code  
SANTA FE NM 87506

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NM District: 03

B.

Full Name (Last, First, Middle Initial)  
BEN R LUJAN

Transaction ID: SB23.13073  
Date of Disbursement

Mailing Address 05 ENTRADA CELEDON Y NESTORA

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

City State Zip Code  
SANTA FE NM 87506

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NM District: 03

C.

Full Name (Last, First, Middle Initial)  
DANIEL B MR. MAFFEI

Transaction ID: SB23.12980  
Date of Disbursement

Mailing Address 15 Pebble Hill N

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	9

City State Zip Code  
DeWitt NY 13214

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 25

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

3000.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ELIZABETH HELEN MARKEY</p> <p>Mailing Address 430 W MOUNTAIN AVE</p> <p>City FORT COLLINS State CO Zip Code 80521</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13035</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ERIC J MASSA</p> <p>Mailing Address 170 Delevan Avenue</p> <p>City Corning State NY Zip Code 14830</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12973</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) MICHAEL MCCAUL</p> <p>Mailing Address 2004 San Miguel</p> <p>City Austin State TX Zip Code 78746</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13060</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Category/Type</p>

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

4000.00

**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"/> 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

A.

Full Name (Last, First, Middle Initial)  
MICHAEL E. MR. MCMAHON

Transaction ID: SB23.13075  
Date of Disbursement

Mailing Address 66 Arnold Street

/   /

City Staten Island State NY Zip Code 10301

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

B.

Full Name (Last, First, Middle Initial)  
KENDRICK B MEEK

Transaction ID: SB23.12963  
Date of Disbursement

Mailing Address 111 NW 183RD STREET SUITE 325

/   /

City MIAMI State FL Zip Code 33169

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: FL District: 00

C.

Full Name (Last, First, Middle Initial)  
JEFFREY ALAN MERKLEY

Transaction ID: SB23.12991  
Date of Disbursement

Mailing Address 1351 SE 114TH AVE

/   /

City PORTLAND State OR Zip Code 97216

Amount of Each Disbursement this Period

Purpose of Disbursement  
Debt Retirement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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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

<p><b>A.</b> Full Name (Last, First, Middle Initial) RALPH BRADLEY MILLER</p> <p>Mailing Address 2306 BEECHRIDGE ROAD PO BOX 20307</p> <p>City RALEIGH State NC Zip Code 27608</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13053 <b>Date of Disbursement</b> 06 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) PATRICK J MURPHY</p> <p>Mailing Address 6419 Radcliffe St.</p> <p>City Bristol State PA Zip Code 19007</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12956 <b>Date of Disbursement</b> 02 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SCOTT M MURPHY</p> <p>Mailing Address 615 Glen Street</p> <p>City Glens Falls State NY Zip Code 12801</p> <p>Purpose of Disbursement Debt Retirement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.13042 <b>Date of Disbursement</b> 05 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

**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"/> 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

A.	Full Name (Last, First, Middle Initial) <b>MIKE PENCE</b>	<b>Transaction ID:</b> SB23.13003
	Mailing Address P.O. Box 408	Date of Disbursement 03 / 24 / 2009
	City Anderson State IN Zip Code 46015	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>ED PERLMUTTER</b>	<b>Transaction ID:</b> SB23.13074
	Mailing Address 2795 JUNIPER DR	Date of Disbursement 06 / 22 / 2009
	City GOLDEN State CO Zip Code 80401	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>DENNIS R REHBERG</b>	<b>Transaction ID:</b> SB23.13006
	Mailing Address 4401 HIGHWAY 3	Date of Disbursement 03 / 24 / 2009
	City BILLINGS State MT Zip Code 59106	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</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)

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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

A.	Full Name (Last, First, Middle Initial) HARRY REID	Transaction ID: SB23.12998 Date of Disbursement 03 / 20 / 2009
	Mailing Address PO BOX 19163	Amount of Each Disbursement this Period 5000.00
	City LAS VEGAS State NV Zip Code 89132	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JAMES E RISCH	Transaction ID: SB23.12997 Date of Disbursement 03 / 11 / 2009
	Mailing Address 407 W JEFFERSON STREET	Amount of Each Disbursement this Period 1000.00
	City BOISE State ID Zip Code 83702	
	Purpose of Disbursement Debt Retirement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARK HAMILTON SCHAUER	Transaction ID: SB23.12965 Date of Disbursement 02 / 25 / 2009
	Mailing Address 1795 HAMILTON ROAD	Amount of Each Disbursement this Period 1000.00
	City BATTLE CREEK State MI Zip Code 49017	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <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

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.	Full Name (Last, First, Middle Initial) ALBIO SIRES	Transaction ID: SB23.13021 Date of Disbursement 04 / 23 / 2009
	Mailing Address 6050 BOULEVARD EAST APT 68	Amount of Each Disbursement this Period 5000.00
	City WEST NEW YORK State NJ Zip Code 07093	
	Purpose of Disbursement	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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ZACHARY T SPACE	Transaction ID: SB23.13032 Date of Disbursement 05 / 07 / 2009
	Mailing Address 4 PARKVIEW DR	Amount of Each Disbursement this Period 1000.00
	City DOVER State OH Zip Code 44622	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HARRY TEAGUE	Transaction ID: SB23.12971 Date of Disbursement 02 / 25 / 2009
	Mailing Address 819 EAST PINON	Amount of Each Disbursement this Period 1000.00
	City HOBBS State NM Zip Code 88240	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02	Disbursement For: 2010 <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)

<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

A.	Full Name (Last, First, Middle Initial) <b>TODD TIAHRT</b>	<b>Transaction ID:</b> SB23.12999
	Mailing Address 1329 AMITY STREET	Date of Disbursement MM / DD / YYYY 03 / 24 / 2009
	City GODDARD State KS Zip Code 67052	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>TODD TIAHRT</b>	<b>Transaction ID:</b> SB23.13048
	Mailing Address 1329 AMITY STREET	Date of Disbursement MM / DD / YYYY 05 / 28 / 2009
	City GODDARD State KS Zip Code 67052	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>MARK E UDALL</b>	<b>Transaction ID:</b> SB23.13020
	Mailing Address PO BOX A	Date of Disbursement MM / DD / YYYY 04 / 22 / 2009
	City ELDORADO SPRINGS State CO Zip Code 80025	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 State: CO District: 00	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**6000.00**

**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)

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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

A.	Full Name (Last, First, Middle Initial) DAVID VITTER	Transaction ID: SB23.12996 Date of Disbursement 03 / 11 / 2009
	Mailing Address 238 HELICE AVENUE	Amount of Each Disbursement this Period 1000.00
	City METAIRIE State LA Zip Code 70005	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ED WHITFIELD	Transaction ID: SB23.13055 Date of Disbursement 06 / 05 / 2009
	Mailing Address 108 ALUMNI AVENUE	Amount of Each Disbursement this Period 1000.00
	City HOPKINSVILLE State KY Zip Code 42240	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHARLES A JR WILSON	Transaction ID: SB23.13058 Date of Disbursement 06 / 05 / 2009
	Mailing Address 125 EAST LAWN	Amount of Each Disbursement this Period 1000.00
	City ST. CLAIRSVILLE State OH Zip Code 43950	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06	Disbursement For: 2010 <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

A.

Full Name (Last, First, Middle Initial)  
DAVID WU

Mailing Address 818 SW 3RD STREET #1182

City PORTLAND State OR Zip Code 97204

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: OR District: 01

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.13026  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	9

Amount of Each Disbursement this Period

1000.00
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SUBTOTAL of Disbursements This Page (optional) ..... ►

1000.00
---------

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

144500.00
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 81 / 81	
	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 Fundraising Event Expense
Mailing Address 1200 Anastasia Avenue	
City State ZIP Code Coral Gables FL 33134	

Outstanding Balance Beginning This Period 35673.00	<b>Transaction ID: SD10.12790</b>	
Amount Incurred This Period 0.00	Payment This Period 35673.00	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 487.62	<b>Transaction ID: SD10.12791</b>	
Amount Incurred This Period 0.00	Payment This Period 487.62	Outstanding Balance at Close of This Period 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>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	0.00