

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  07 01 2018 through  /  /  09 30 2018

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

Signature of Treasurer **RIESCO, JOSE, , ,** [Electronically Filed] Date  /  /  03 26 2019

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		175972.08
(b) Cash on Hand at Beginning of Reporting Period.....	174572.98	
(c) Total Receipts (from Line 19) .....	21670.00	62420.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	196242.98	238392.08
7. Total Disbursements (from Line 31).....	37371.42	79520.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	158871.56	158871.56
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21670.00	62420.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21670.00	62420.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	21670.00	62420.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	21670.00	62420.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21670.00	62420.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	10871.42	12520.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10871.42	12520.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	67000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	37371.42	79520.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37371.42	79520.52

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21670.00	62420.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21670.00	62420.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10871.42	12520.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10871.42	12520.52

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<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. INFANTE, JOSE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9700 NW 79TH AVENUE  
 City HIALEAH State FL Zip Code 33016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SFM SERVICE INC. Occupation (for Individual) PRESIDENT/OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 13 / 2018  
**Transaction ID : SA11AI.4178**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. LEON, SILVA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8600 NW 41 STREET  
 City DORAL State FL Zip Code 33166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LEON MEDICAL CENTER Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt 08 / 28 / 2018  
**Transaction ID : SA11AI.4179**  
 Amount of Each Receipt this Period 1170.00  
 Memo Item

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

Date of Receipt 08 / 13 / 2018  
**Transaction ID : SA11AI.4181**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11170.00
<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: (check only one)	PAGE 7 OF 14
<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. PALENZUELA, GONZALO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1195 NW 97 AVENUE  
 City DORAL State FL Zip Code 33712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARIBBEAN EXPORT, INC. Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 12 / 2018  
**Transaction ID : SA11AI.4183**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. WILLIAMS, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 CORAL WAY  
 City CORAL GABLES State FL Zip Code 33145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 13 / 2018  
**Transaction ID : SA11AI.4187**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. WILLIAMS, VIVIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2300 CORAL WAY  
 City CORAL GABLES State FL Zip Code 33145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOPEZ CANTERA CPA Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 13 / 2018  
**Transaction ID : SA11AI.4185**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	21670.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. ARROM BUSINESS, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 3178 SW 22 TERRACE

City MIAMI State FL Zip Code 33145

Purpose of Disbursement EVENT PRODUCTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4193

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. CALDERON, EDDY, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 13001 NW 107TH AVENUE

City HIALEAH State FL Zip Code 33018

Purpose of Disbursement EVENT ANNOUNCER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period: 300.00

Memo Item

**C. DE FANA, ANGEL, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8368 SW BIRD ROAD

City MIAMI State FL Zip Code 33155

Purpose of Disbursement PRINTING AND REPRODUCTION SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period: 871.37

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3671.37

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELCORO, JOSE LUIS, , ,**

Mailing Address 13001 NW 107TH AVENUE

City  
HIALEAH

State  
FL

Zip Code  
33018

Purpose of Disbursement  
EVENT ENTERTAINMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4198**  
Amount of Each Disbursement this Period  
[ ] 300.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. MIAMI-DADE AUDITORIUM**

Mailing Address 2901 W. FLAGLER STREET

City  
MIAMI

State  
FM

Zip Code  
33135

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4200**  
Amount of Each Disbursement this Period  
[ ] 1000.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. MIAMI-DADE AUDITORIUM**

Mailing Address 2901 W. FLAGLER STREET

City  
MIAMI

State  
FM

Zip Code  
33135

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4202**  
Amount of Each Disbursement this Period  
[ ] 4000.00 [ ]

Memo Item

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

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

5	3	0	0	0	0
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. NODAR, JOSE, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2018	
Mailing Address 13001 NW 107TH AVENUE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4203</b> Amount of Each Disbursement this Period [ ] 300.00	
City HIALEAH	State FL	Zip Code 33018	Category/ Type [ ]
Purpose of Disbursement EVENT TALENT		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		
Full Name (Last, First, Middle Initial) <b>B. RODES PRINTING</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2018	
Mailing Address 8369 SW BIRD ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4205</b> Amount of Each Disbursement this Period [ ] 1300.05	
City MIAMI	State FL	Zip Code 33155	Category/ Type [ ]
Purpose of Disbursement PRINTING SERVICES		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	
Full Name (Last, First, Middle Initial) <b>C. ROMAN, PEDRO, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 24 / 2018	
Mailing Address 13001 NW 107TH AVENUE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4207</b> Amount of Each Disbursement this Period [ ] 300.00	
City HIALEAH	State FL	Zip Code 33018	Category/ Type [ ]
Purpose of Disbursement EVENT ENTERTAINMENT		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[ ] 1900.05	
<b>TOTAL</b> This Period (last page this line number only)..... ▶		[ ] 10871.42	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. ANDY BARR FOR CONGRESS, INC.**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
09 / 13 / 2018

Mailing Address PO BOX 2059

City LEXINGTON State KY Zip Code 40588

Purpose of Disbursement

FEC Identification Number: C00467571  
Transaction ID : SB23.4209  
Amount of Each Disbursement this Period: 2500.00

Candidate Name: BARR, GARLAND ANDY, , ,  
Category/Type

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

State: KY District: 06

Memo Item

**B. CARLOS CURBELO CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
08 / 07 / 2018

Mailing Address 8724 SUNSET DR #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement

FEC Identification Number: C00546846  
Transaction ID : SB23.4211  
Amount of Each Disbursement this Period: 2500.00

Candidate Name: CARLOS CURBELO CONGRESS  
Category/Type

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

State: FL District: 26

Memo Item

**C. CONNOLLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
09 / 26 / 2018

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement

FEC Identification Number: C00445452  
Transaction ID : SB23.4213  
Amount of Each Disbursement this Period: 2000.00

Candidate Name: CONNOLLY, GERALD EDWARD, , ,  
Category/Type

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

State: VA District: 11

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. ESPAILLAT FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2018
Mailing Address 210 SHERMAN AVENUE SUITE B		FEC Identification Number C 000518365 <b>Transaction ID : SB23.4215</b>
City NEW YORK	State NY	Zip Code 10034
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>ESPAILLAT, ADRIANO, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 13	

Full Name (Last, First, Middle Initial) <b>B. KEATING, WILLIAM RICHARD, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2018
Mailing Address 10 BRIARWOOD LANE		FEC Identification Number C HOMA10082 <b>Transaction ID : SB23.4220</b>
City MONUMENT BEACH	State MA	Zip Code 02553
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MA	District: 09	

Full Name (Last, First, Middle Initial) <b>C. KEVIN ABEL FOR CONGRESS, INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address PO BOX 28009		FEC Identification Number C C00658625 <b>Transaction ID : SB23.4221</b>
City ATLANTA	State GA	Zip Code 30358
Purpose of Disbursement		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>ABEL, KEVIN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 06	

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. MARIA ELVIRA SALAZAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 558033

City MIAMI State FL Zip Code 33255

Purpose of Disbursement

Candidate Name  
**SALAZAR, MARIA ELVIRA, , ,**

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

State: FL District: 27

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: **C00671859**  
Transaction ID : **SB23.4229**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. NORCROSS, DONALD W, , ,**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 MARKET STREET UNIT 522

City CAMDEN State NJ Zip Code 08102

Purpose of Disbursement

Candidate Name

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

State: NJ District: 01

Date of Disbursement: 09 / 26 / 2018

FEC Identification Number: **C H4NJ01084**  
Transaction ID : **SB23.4232**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. PALLONE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement

Candidate Name  
**PALLONE, FRANK JR, , ,**

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

State: NJ District: 06

Date of Disbursement: 09 / 26 / 2018

FEC Identification Number: **C00226928**  
Transaction ID : **SB23.4234**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. PASCRELL FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address POB 100

City TEANECK State NJ Zip Code 07666

Purpose of Disbursement

Candidate Name  
**PASCRELL, WILLIAM J. JR., , ,**

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

State: NJ District: 09

Date of Disbursement: 09 / 26 / 2018

FEC Identification Number: C00313510  
Transaction ID : SB23.4237  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. RENACCI FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement

Candidate Name  
**RENACCI, JAMES B, , ,**

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

State: OH District: 00

Date of Disbursement: 08 / 27 / 2018

FEC Identification Number: C00466359  
Transaction ID : SB23.4240  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. SIRES FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 6050 BLVD. EAST  
APT. 6B

City WEST NEW YORK State NJ Zip Code 07093

Purpose of Disbursement

Candidate Name  
**SIRES, ALBIO, , ,**

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

State: NJ District: 08

Date of Disbursement: 09 / 26 / 2018

FEC Identification Number: C00410753  
Transaction ID : SB23.4243  
Amount of Each Disbursement this Period: 5000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	26500.00