

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
U.S.-Cuba Democracy Political Action Committee

ADDRESS (number and street) P.O. Box 22945  
 Check if different than previously reported. (ACC)  
Hialeah FL 33002-2945

2. **FEC IDENTIFICATION NUMBER** 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 Quarterly 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 2010 through 09 30 2010

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 Mr. Gus Machado

Signature of Treasurer Electronically Filed by Mr. Gus Machado Date 10 10 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**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	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		131359.53
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	74294.77									
(c) Total Receipts (from Line 19) .....	89600.77	224189.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	163895.54	355548.77								
7. Total Disbursements (from Line 31) .....	107742.24	299395.47								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	56153.30	56153.30								
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

FEC Form 3X (Rev. 06/2004)

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

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	57697.77	179178.74
(ii) Unitemized .....	31903.00	35010.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	89600.77	214189.24
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	89600.77	224189.24
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	89600.77	224189.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	89600.77	224189.24

**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.....	30742.24	56895.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	30742.24	56895.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	77000.00	242500.00
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))..	107742.24	299395.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107742.24	299395.47

**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) .....	89600.77	224189.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	89600.77	224189.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30742.24	56895.47
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	30742.24	56895.47

# 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 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Elena Albareda	Date of Receipt MM / DD / YYYY 08 / 21 / 2010
	Mailing Address 7020 S.W. 82nd Ave.	<b>Transaction ID:</b> SA11AI.14834
	City State Zip Code Miami FL 33143	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer n/a Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Nelson Jesus Albareda	Date of Receipt MM / DD / YYYY 08 / 17 / 2010
	Mailing Address 5000 SW 75th Ave. 4th Floor	<b>Transaction ID:</b> SA11AI.14700
	City State Zip Code Miami FL 33155	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Eventus Marketing, Inc. Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Ralph Aleman	Date of Receipt MM / DD / YYYY 08 / 21 / 2010
	Mailing Address 7588 N.W. 51st Place	<b>Transaction ID:</b> SA11AI.14480
	City State Zip Code Coral Springs FL 33067	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Palmetto General Hospital Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4500.00</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: (check only one)	PAGE 7 / 54
	<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) Mrs. Gladys Alon		Date of Receipt	
	Mailing Address 14721 SW 60th Terrace		M M / D D / Y Y Y Y 08 / 08 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.14716
	Miami	FL	33193	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		262.00	
Name of Employer Self-Employed		Occupation Hair Stylist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		262.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Eduardo R. Arista, Esq.		Date of Receipt	
	Mailing Address 2655 Lejeune Road Suite 572		M M / D D / Y Y Y Y 09 / 29 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.15140
	Coral Gables	FL	33134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1500.00	
Name of Employer Arista & Feldman P.A.		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Pedro Barba		Date of Receipt	
	Mailing Address 269 400 Street		M M / D D / Y Y Y Y 08 / 28 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.14986
	San Juan	PR	00927	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		260.00	
Name of Employer Self-Employed		Occupation Food Importer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2022.00
<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 8 / 54
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Elena Barbosa	Date of Receipt MM / DD / YYYY 08 / 14 / 2010
	Mailing Address 5656 Bay Side Drive	<b>Transaction ID:</b> SA11AI.14811
	City State Zip Code Orlando FL 32819	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1070.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Angel Battle	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address 10520 S.W. 103rd Street	<b>Transaction ID:</b> SA11AI.14768
	City State Zip Code Miami FL 33176	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer American Airlines Occupation Supervisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Douglas Beller	Date of Receipt MM / DD / YYYY 07 / 20 / 2010
	Mailing Address 401 E. Las Olas Blvd. #1101	<b>Transaction ID:</b> SA11AI.14457
	City State Zip Code Ft. Lauderdale FL 33301	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer CCS, Beller, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1320.00
<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 9 / 54  
(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. Otto P. Campo

Mailing Address 781 Crandon Blvd.  
#1202

City State Zip Code  
Key Biscayne FL 33149

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

Name of Employer Occupation  
MCCI, Corp. Chief Financial Advisor

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 13 / 2010

**Transaction ID:** SA11AI.14789

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jose A. Cancio

Mailing Address 799 Crandon Blvd.  
Apt. #307

City State Zip Code  
Key Biscayne FL 33149

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

Name of Employer Occupation  
Central Concrete Super Mix President

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 502.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2010

**Transaction ID:** SA11AI.14764

Amount of Each Receipt this Period  
502.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mauricio Claver-Carone, Esq.

Mailing Address 2501 M Street, N.W.  
#608

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation  
Cuba Democracy Advocates, Inc. Executive Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2002.24

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2010

**Transaction ID:** SA11AI.15143

Amount of Each Receipt this Period  
26.27

In-kind - PAC-Only FedEx Expense

**SUBTOTAL** of Receipts This Page (optional) ..... ► 778.27

**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 10 / 54  
(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) Dr. Manuel Coto		Date of Receipt MM / DD / YYYY 08 / 29 / 2010
Mailing Address 8803 Silkbay Place		<b>Transaction ID:</b> SA11AI.14872
City Orlando	State FL	Zip Code 32827
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Central FL Veterans Hospital	Occupation Urologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**B.**

Full Name (Last, First, Middle Initial) Mrs. Marianne Coto		Date of Receipt MM / DD / YYYY 08 / 25 / 2010
Mailing Address 799 Crandon Blvd. Apt. #504		<b>Transaction ID:</b> SA11AI.14919
City Key Biscayne	State FL	Zip Code 33149
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Self-Employed	Occupation Interior Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

**C.**

Full Name (Last, First, Middle Initial) Dr. Lucy de la Cruz		Date of Receipt MM / DD / YYYY 08 / 17 / 2010
Mailing Address 10000 SW 30th Street		<b>Transaction ID:</b> SA11AI.14635
City Miami	State FL	Zip Code 33165
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 252.00
Name of Employer UM/Jackson Hospital	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>852.00</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: (check only one)	PAGE 11 / 54
	<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. Erasmo Donzabala	Date of Receipt MM / DD / YYYY 08 / 14 / 2010
	Mailing Address 799 Crandon Blvd. #305	<b>Transaction ID:</b> SA11AI.14795
	City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self-Employed Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Eudaldo Farre	Date of Receipt MM / DD / YYYY 08 / 12 / 2010
	Mailing Address 2775 Kinsington Circle	<b>Transaction ID:</b> SA11AI.14855
	City State Zip Code Weston FL 33332	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer n/a Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. George Feldenkreis	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 3000 N.W. 107 Avenue	<b>Transaction ID:</b> SA11AI.15129
	City State Zip Code Miami FL 33172	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Perry Ellis International Occupation Chairman and CEO	
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) .....	▶	2460.00
<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 12 / 54
	<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. Salvador Fernandez	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address 791 Crandon Blvd. #603	<b>Transaction ID:</b> SA11AI.14784
	City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 252.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Jorge Fiterre	Date of Receipt MM / DD / YYYY 08 / 21 / 2010
	Mailing Address 2029 S.W. 105th Court	<b>Transaction ID:</b> SA11AI.14769
	City State Zip Code Miami FL 33165	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Condista Ad Sales, Inc. Occupation Ad Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Luis E. Garcia	Date of Receipt MM / DD / YYYY 08 / 28 / 2010
	Mailing Address 9250 S.W. 68th Street	<b>Transaction ID:</b> SA11AI.14921
	City State Zip Code Miami FL 33173	Amount of Each Receipt this Period 520.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1072.00</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 13 / 54  
(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. Magdalena Garcia  
 Mailing Address 977 W. 33rd Street  
 City Hialeah State FL Zip Code 33012  
 Date of Receipt 08 / 30 / 2010  
**Transaction ID:** SA11AI.14902  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 227.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gregorio Gorrin  
 Mailing Address 8828 NW 176th Street  
 City Miami State FL Zip Code 33018  
 Date of Receipt 08 / 19 / 2010  
**Transaction ID:** SA11AI.14617  
 Amount of Each Receipt this Period 222.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Self-Employed Occupation Homebuilder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 222.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joel Guillen  
 Mailing Address 12040 SW 177th Terrace  
 City Miami State FL Zip Code 33177  
 Date of Receipt 08 / 22 / 2010  
**Transaction ID:** SA11AI.14692  
 Amount of Each Receipt this Period 260.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Self-Employed Occupation Auto Repair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 260.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 532.00  
**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 14 / 54  
(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. 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 n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 24 / 2010

Transaction ID: SA11AI.14697

Amount of Each Receipt this Period  
1800.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Christian H. Infante

Mailing Address 3225 Bird Avenue

City State Zip Code  
Miami FL 33133

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

Name of Employer SFM Services, Inc. Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 23 / 2010

Transaction ID: SA11AI.14695

Amount of Each Receipt this Period  
875.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Rebeca Kravec

Mailing Address 10101 Collins Avenue #10E

City State Zip Code  
Bal Harbor FL 33154

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

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 17 / 2010

Transaction ID: SA11AI.14614

Amount of Each Receipt this Period  
262.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2937.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Benjamin Leon, III	Date of Receipt MM / DD / YYYY 08 / 21 / 2010
	Mailing Address 9452 S.W. 124th Terrace	<b>Transaction ID:</b> SA11AI.14549
	City State Zip Code Miami FL 33176	Amount of Each Receipt this Period 1800.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Leon Medical Centers Occupation Senior V.P. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Benjamin Leon, Jr.	Date of Receipt MM / DD / YYYY 07 / 22 / 2010
	Mailing Address 630 Leucadendra Drive	<b>Transaction ID:</b> SA11AI.14460
	City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Leon Medical Centers Occupation Chief Executive Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs. Silvia Leon	Date of Receipt MM / DD / YYYY 07 / 22 / 2010
	Mailing Address 360 Leucadendra Dr.	<b>Transaction ID:</b> SA11AI.14459
	City State Zip Code Coral Gables FL 33156	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer n/a Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11800.00
<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 16 / 54
	<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. Alain Lopez	Date of Receipt MM / DD / YYYY 08 / 21 / 2010
	Mailing Address 1800 Wilson Blvd. #242	<b>Transaction ID:</b> SA11AI.14519
	City Arlington State VA Zip Code 22201	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Wilmer Hale, LLP Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1130.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Miguel Angel Lopez	Date of Receipt MM / DD / YYYY 08 / 23 / 2010
	Mailing Address 799 Crandon Blvd. Apt. 1502	<b>Transaction ID:</b> SA11AI.14796
	City Key Biscayne State FL Zip Code 33149	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gus Machado	Date of Receipt MM / DD / YYYY 07 / 14 / 2010
	Mailing Address 1200 West 49th Street	<b>Transaction ID:</b> SA11AI.15154
	City Hialeah State FL Zip Code 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 Gus Machado Enterprises Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>407.50</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 17 / 54  
(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) ▼ 357.50

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2010

**Transaction ID:** SA11AI.15156

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) ▼ 385.00

Date of Receipt  
MM / DD / YYYY  
09 / 09 / 2010

**Transaction ID:** SA11AI.15158

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) ▼ 412.50

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2010

**Transaction ID:** SA11AI.15160

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: PAGE 18 / 54  
(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) ▼ 440.00

Date of Receipt  

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

**Transaction ID:** SA11AI.15162

Amount of Each Receipt this Period  
27.50

In-kind - PAC-Only UPS Ex-pense

**B.** 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: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  

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

**Transaction ID:** SA11AI.15048

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Ana Margarita Martinez

Mailing Address 12857 SW 65th Terrace

City State Zip Code  
Miami FL 33183

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

Name of Employer Occupation  
Self-Employed Public Relations Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  

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

**Transaction ID:** SA11AI.14488

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **577.50**

**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: PAGE 19 / 54  
(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. Lourdes Martinez

Mailing Address 2710 SW 77th Court

City State Zip Code  
Miami FL 33155

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

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2010

Transaction ID: SA11AI.14522

Amount of Each Receipt this Period  
330.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Luz Martinez

Mailing Address 615 W Park Drive #106

City State Zip Code  
Miami FL 33172

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2010

Transaction ID: SA11AI.15081

Amount of Each Receipt this Period  
220.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Walter Martinez

Mailing Address 4130 Malaga Avenue

City State Zip Code  
Coconut Grove FL 33133

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt  
MM / DD / YYYY  
08 / 18 / 2010

Transaction ID: SA11AI.14741

Amount of Each Receipt this Period  
262.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **812.00**

**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 20 / 54  
(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. Leticia Milian

Mailing Address 5911 Leonardo Street

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 10 / 2010

**Transaction ID:** SA11AI.14751

Amount of Each Receipt this Period  
260.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Eloisa Morales

Mailing Address 737 N Greenway Drive

City State Zip Code  
Coral Gables FL 33134

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

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2010

**Transaction ID:** SA11AI.14644

Amount of Each Receipt this Period  
262.00

**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 n/a Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 20 / 2010

**Transaction ID:** SA11AI.14566

Amount of Each Receipt this Period  
3600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4122.00**

**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 21 / 54  
(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)  
Ms. Esther Nuhfer

Mailing Address 2665 SW 37th Ave.  
#504

City Miami State FL Zip Code 33133

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

Name of Employer Communication Solutions, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1325.00

Date of Receipt 08 / 21 / 2010

Transaction ID: SA11AI.14518

Amount of Each Receipt this Period 325.00

**B.**

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

Mailing Address 1551 Bird Road

City Coral Gables State FL Zip Code 33146

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

Name of Employer n/a Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 19 / 2010

Transaction ID: SA11AI.14629

Amount of Each Receipt this Period 750.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Ramon Pacheco

Mailing Address 8305 SW 174th Terr

City Palmetto Bay State FL Zip Code 33157

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

Name of Employer Pacheco & Associates Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 08 / 15 / 2010

Transaction ID: SA11AI.14781

Amount of Each Receipt this Period 252.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1327.00

**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 22 / 54  
(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. 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  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1510.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2010

**Transaction ID:** SA11AI.14481

Amount of Each Receipt this Period  
510.00

**B.** 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  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2110.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2010

**Transaction ID:** SA11AI.14482

Amount of Each Receipt this Period  
600.00

**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  
Self-Employed Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2505.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2010

**Transaction ID:** SA11AI.15012

Amount of Each Receipt this Period  
395.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1505.00

**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 23 / 54  
(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)  
Ms. Melissa A. Padron

Mailing Address 1764 N. Sycamore Avenue  
#308

City Hollywood State CA Zip Code 90028

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt: 08 / 04 / 2010  
Transaction ID: SA11AI.14736  
Amount of Each Receipt this Period: 1800.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Melissa A. Padron

Mailing Address 1764 N. Sycamore Avenue  
#308

City Hollywood State CA Zip Code 90028

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1930.00

Date of Receipt: 08 / 21 / 2010  
Transaction ID: SA11AI.14495  
Amount of Each Receipt this Period: 130.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Melissa A. Padron

Mailing Address 1764 N. Sycamore Avenue  
#308

City Hollywood State CA Zip Code 90028

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2035.00

Date of Receipt: 08 / 28 / 2010  
Transaction ID: SA11AI.15005  
Amount of Each Receipt this Period: 105.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2035.00

**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 / 54  
(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. Nilda Pedrosa

Mailing Address 4901 Alhambra Circle

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
FIU School of Law Assistant Dean

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 725.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2010

Transaction ID: SA11AI.14564

Amount of Each Receipt this Period  
125.00

**B.**

Full Name (Last, First, Middle Initial)  
Dr. Constantino Pena

Mailing Address 785 Crandon Blvd.  
#904

City State Zip Code  
Key Biscayne FL 33149

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 29 / 2010

Transaction ID: SA11AI.14955

Amount of Each Receipt this Period  
250.00

**C.**

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

Mailing Address 6410 Granada Blvd.

City State Zip Code  
Coral Gables FL 33146

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

Name of Employer Occupation  
CAS Group President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3125.00

Date of Receipt  
MM / DD / YYYY  
08 / 18 / 2010

Transaction ID: SA11AI.14641

Amount of Each Receipt this Period  
1625.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**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 25 / 54  
(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. Ileana Perez

Mailing Address 1241 Andalucia Ave.

City State Zip Code  
Coral Gables FL 33134

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

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2010

**Transaction ID:** SA11AI.14577

Amount of Each Receipt this Period  
262.00

**B.** 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 Perez-Abreu P.A. Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2010

**Transaction ID:** SA11AI.14458

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Julio Pinera

Mailing Address 6578 NW 113 Place

City State Zip Code  
Doral FL 33178

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2010

**Transaction ID:** SA11AI.14599

Amount of Each Receipt this Period  
227.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **989.00**

**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 26 / 54  
(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. Lily Prellezo

Mailing Address 5841 SW 76th St.

City State Zip Code  
Miami FL 33143

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

Name of Employer Self-Employed Occupation  
Occupation Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
MM / DD / YYYY  
08 / 28 / 2010

**Transaction ID:** SA11AI.14870

Amount of Each Receipt this Period  
250.00

**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 Capri Builders Occupation  
CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 28 / 2010

**Transaction ID:** SA11AI.14866

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Ileana Puig

Mailing Address 1121 Crandon Blvd.  
#F1107

City State Zip Code  
Key Biscayne FL 33149

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

Name of Employer n/a Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

**Transaction ID:** SA11AI.14920

Amount of Each Receipt this Period  
260.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **810.00**

**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 27 / 54

(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Ana Pujals, Esq.		Date of Receipt MM / DD / YYYY 09 / 28 / 2010		
	Mailing Address 1722 Country Club Prado		<b>Transaction ID:</b> SA11AI.15130		
	City Coral Gables	State FL	Zip Code 33134	Amount of Each Receipt this Period 3000.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Self-Employed	Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Victor Pujals		Date of Receipt MM / DD / YYYY 08 / 30 / 2010		
	Mailing Address 1915 Brickell Avenue Apt. 401-C		<b>Transaction ID:</b> SA11AI.14878		
	City Miami	State FL	Zip Code 33129	Amount of Each Receipt this Period 1500.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer CDM, Corp.	Occupation Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Jose A. Rey		Date of Receipt MM / DD / YYYY 08 / 28 / 2010		
	Mailing Address 8527 Chickasaw Farms Lane		<b>Transaction ID:</b> SA11AI.15049		
	City Orlando	State FL	Zip Code 32825	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Tony Rey Homés	Occupation Builder			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4800.00</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 28 / 54  
(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. Santos Rivero

Mailing Address 7801 NE 4th Ct.  
#315

City Miami State FL Zip Code 33138

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

Name of Employer Self-Employed Occupation Hurricane Window Installation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 08 / 29 / 2010  
Transaction ID: SA11AI.15065  
Amount of Each Receipt this Period: 260.00

**B.**

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

Mailing Address 3814 SW 144 Place

City Miami State FL Zip Code 33175

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt: 08 / 20 / 2010  
Transaction ID: SA11AI.14798  
Amount of Each Receipt this Period: 262.00

**C.**

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

Mailing Address 1790 Bay Drive

City Miami Beach State FL Zip Code 33141

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

Name of Employer Health Care Consulting Service Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt: 08 / 28 / 2010  
Transaction ID: SA11AI.14871  
Amount of Each Receipt this Period: 1800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2322.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 54
	<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. Roberto Sanchez	Date of Receipt MM / DD / YYYY 08 / 28 / 2010
	Mailing Address 1790 Bay Drive	<b>Transaction ID:</b> SA11AI.15098
	City State Zip Code Miami Beach FL 33141	Amount of Each Receipt this Period 3200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Care Consulting Service Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Maria San Pedro	Date of Receipt MM / DD / YYYY 08 / 22 / 2010
	Mailing Address 7740 Camino Real #G311	<b>Transaction ID:</b> SA11AI.14777
	City State Zip Code Miami FL 33143	Amount of Each Receipt this Period 227.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer n/a Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 227.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Jorge Sanson	Date of Receipt MM / DD / YYYY 08 / 17 / 2010
	Mailing Address 13015 SW 89 Place #173	<b>Transaction ID:</b> SA11AI.14864
	City State Zip Code Miami FL 33176	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer JT Management, Inc. Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3827.00
<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 / 54  
(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. Justin Sayfie, Esq.  
 Mailing Address 450 East Las Olas Blvd.  
#700  
 City Ft. Lauderdale State FL Zip Code 33301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Blosser & Sayfie Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt 09 / 21 / 2010  
**Transaction ID:** SA11AI.15126  
 Amount of Each Receipt this Period 500.00

**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 ▼ 3800.00  
 Date of Receipt 08 / 15 / 2010  
**Transaction ID:** SA11AI.14722  
 Amount of Each Receipt this Period 1800.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Rolando Tapanes  
 Mailing Address 190 NE 3rd Street  
 City Miami State FL Zip Code 33132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Miami Parking Authority Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 377.00  
 Date of Receipt 08 / 23 / 2010  
**Transaction ID:** SA11AI.14650  
 Amount of Each Receipt this Period 377.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2677.00  
**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 / 54  
(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. Fabiola M. Valdes		Date of Receipt MM / DD / YYYY 08 / 19 / 2010
Mailing Address 280 SW 20th Road #602		<b>Transaction ID:</b> SA11AI.14712
City Miami	State FL	Zip Code 33129
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 262.00
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Gonzalo Valdes		Date of Receipt MM / DD / YYYY 08 / 21 / 2010
Mailing Address 5701 Collins Ave. #1010		<b>Transaction ID:</b> SA11AI.14791
City Miami Beach	State FL	Zip Code 33140
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 222.00
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Mario Valdes		Date of Receipt MM / DD / YYYY 08 / 21 / 2010
Mailing Address 14306 SW 55th Street		<b>Transaction ID:</b> SA11AI.14502
City Miami	State FL	Zip Code 33175
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 260.00
Name of Employer n/a	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>744.00</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 32 / 54  
(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)  
Dr. Francisco Vasallo

Mailing Address 9214 SW 9th Terrace

City State Zip Code  
Miami FL 33174

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 ▼ 262.00

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2010

**Transaction ID:** SA11AI.14571

Amount of Each Receipt this Period  
262.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Augusto L. Vidaurreta

Mailing Address 2817 Lake Ave.

City State Zip Code  
Miami Beach FL 33140

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

Name of Employer RAM Strategies, Inc. Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2010

**Transaction ID:** SA11AI.14576

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **387.00**

**TOTAL** This Period (last page this line number only) ..... ► **57697.77**



**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) Mr. Mauricio Claver-Carone, Esq.	Transaction ID: SB21B.15144
	Mailing Address 2501 M Street, N.W. #608	Date of Disbursement MM / DD / YYYY 09 / 08 / 2010
	City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period 26.27
	Purpose of Disbursement In-kind - PAC-Only FedEx Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Coastal Insurance Group, Inc.	Transaction ID: SB21B.15150
	Mailing Address 150 Westward Drive	Date of Disbursement MM / DD / YYYY 07 / 28 / 2010
	City Miami Springs State FL Zip Code 33166	Amount of Each Disbursement this Period 404.00
	Purpose of Disbursement PAC-Only Fundraising Event Insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Eventus, Inc.	Transaction ID: SB21B.15152
	Mailing Address 5000 S.W. 75th Avenue 4th Floor	Date of Disbursement MM / DD / YYYY 08 / 03 / 2010
	City Miami State FL Zip Code 33155	Amount of Each Disbursement this Period 3760.00
	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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4190.27</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) Mr. Gus Machado	Transaction ID: SB21B.15155 Date of Disbursement 07 / 14 / 2010
	Mailing Address 1200 West 49th Street	Amount of Each Disbursement this Period 27.50
	City Hialeah State FL Zip Code 33012	
	Purpose of Disbursement In-kind - PAC-Only UPS Expense	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) Mr. Gus Machado	Transaction ID: SB21B.15157 Date of Disbursement 07 / 22 / 2010
	Mailing Address 1200 West 49th Street	Amount of Each Disbursement this Period 27.50
	City Hialeah State FL Zip Code 33012	
	Purpose of Disbursement In-kind - PAC-Only UPS Expense	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. Gus Machado	Transaction ID: SB21B.15159 Date of Disbursement 09 / 09 / 2010
	Mailing Address 1200 West 49th Street	Amount of Each Disbursement this Period 27.50
	City Hialeah State FL Zip Code 33012	
	Purpose of Disbursement In-kind - PAC-Only UPS Expense	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) .....	<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)

<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) ▼	Transaction ID: SB21B.15161 Date of Disbursement 09 / 20 / 2010  Amount of Each Disbursement this Period 27.50
<b>B.</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) ▼	Transaction ID: SB21B.15163 Date of Disbursement 09 / 29 / 2010  Amount of Each Disbursement this Period 27.50
<b>C.</b>	Full Name (Last, First, Middle Initial) Mastercom, Inc.  Mailing Address 5889 NW 36th Street  City Virginia Gardens State FL Zip Code 33166  Purpose of Disbursement PAC-Only Printing and 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.15148 Date of Disbursement 09 / 21 / 2010  Amount of Each Disbursement this Period 2220.25

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

2275.25

**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

<b>A.</b>	Full Name (Last, First, Middle Initial) Miami-Dade Auditorium  Mailing Address 2901 West Flagler Street  City Miami State FL Zip Code 33135  Purpose of Disbursement PAC-Only Fundraising Event Deposit 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.15147 <b>Date of Disbursement</b> 07 / 27 / 2010  <b>Amount of Each Disbursement this Period</b> 3500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Miami-Dade Auditorium  Mailing Address 2901 West Flagler Street  City Miami State FL Zip Code 33135  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.15145 <b>Date of Disbursement</b> 08 / 24 / 2010  <b>Amount of Each Disbursement this Period</b> 12548.70
<b>C.</b>	Full Name (Last, First, Middle Initial) Theatrical Payroll Service, Inc.  Mailing Address 4520 NE 18th Avenue 3rd Floor  City Ft. Lauderdale State FL Zip Code 33334  Purpose of Disbursement PAC-Only Fundraising Event Staff 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.15146 <b>Date of Disbursement</b> 08 / 19 / 2010  <b>Amount of Each Disbursement this Period</b> 3502.04

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

19550.74

**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) <b>ROBERT E ANDREWS</b>	<b>Transaction ID: SB23.15134</b>
	Mailing Address <b>215 FOURTH AVENUE</b>	Date of Disbursement 09 / 29 / 2010
	City <b>HADDON HEIGHTS</b> State <b>NJ</b> Zip Code <b>08035</b>	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	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>NJ</b> District: <b>01</b>	

B.	Full Name (Last, First, Middle Initial) <b>MICHAEL A ARCURI</b>	<b>Transaction ID: SB23.15136</b>
	Mailing Address <b>PO Box 8508</b>	Date of Disbursement 09 / 29 / 2010
	City <b>Utica</b> State <b>NY</b> Zip Code <b>13505</b>	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	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>NY</b> District: <b>24</b>	

C.	Full Name (Last, First, Middle Initial) <b>MELISSA LUBURICH BEAN</b>	<b>Transaction ID: SB23.14456</b>
	Mailing Address <b>203 FRANCES LANE</b>	Date of Disbursement 07 / 14 / 2010
	City <b>BARRINGTON</b> State <b>IL</b> Zip Code <b>60010</b>	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	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>IL</b> District: <b>08</b>	

<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)

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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) SHELLEY BERKLEY	Transaction ID: SB23.14452
	Mailing Address 3069 CONQUISTA COURT	Date of Disbursement 07 / 14 / 2010
	City LAS VEGAS State NV Zip Code 89121	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: NV District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) F. ALLEN JR. BOYD	Transaction ID: SB23.14478
	Mailing Address P.O. Box 15703	Date of Disbursement 08 / 17 / 2010
	City Tallahassee State FL Zip Code 32317	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: 02	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: SB23.14479
	Mailing Address P.O. Box 15703	Date of Disbursement 08 / 17 / 2010
	City Tallahassee State FL Zip Code 32317	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: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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) G K BUTTERFIELD	Transaction ID: SB23.14454 Date of Disbursement 07 / 14 / 2010
	Mailing Address 2407 Bel Air Avenue	Amount of Each Disbursement this Period 1000.00
	City Wilson State NC Zip Code 27893	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RUSS CARNAHAN	Transaction ID: SB23.14453 Date of Disbursement 07 / 14 / 2010
	Mailing Address 3150 ALLEN AVE	Amount of Each Disbursement this Period 1000.00
	City ST LOUIS State MO Zip Code 63104	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHRISTOPHER CARNEY	Transaction ID: SB23.14455 Date of Disbursement 07 / 14 / 2010
	Mailing Address PO Box 38	Amount of Each Disbursement this Period 1000.00
	City Dimock State PA Zip Code 18816	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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)

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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) A.B. III CHANDLER</p> <p>Mailing Address P. O. Box 12678</p> <p>City Lexington State KY Zip Code 40508</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: KY District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.14447 <b>Date of Disbursement</b> 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.14467 <b>Date of Disbursement</b> 07 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.14468 <b>Date of Disbursement</b> 07 / 22 / 2010</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)

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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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>KATHLEEN DAHLKEMPER</b>  Mailing Address PO BOX 1045  City Erie State PA Zip Code 16512  Purpose of Disbursement  Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.15138 Date of Disbursement 09 / 29 / 2010  Amount of Each Disbursement this Period 2000.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>Mr. THEODORE E. DEUTCH</b>  Mailing Address 20423 SR 7 Suite F6-383  City Boca Raton State FL Zip Code 33498  Purpose of Disbursement  Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.15100 Date of Disbursement 08 / 28 / 2010  Amount of Each Disbursement this Period 5000.00  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>CHARLES KONG DJOU</b>  Mailing Address P O BOX 23580  City HONOLULU State HI Zip Code 96813  Purpose of Disbursement  Candidate Name  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.15124 Date of Disbursement 09 / 20 / 2010  Amount of Each Disbursement this Period 1000.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8000.00</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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>JOSEPH SIMON DONNELLY</b>	<b>Transaction ID:</b> SB23.15137 Date of Disbursement 09 / 29 / 2010	
	Mailing Address 16200 FOXCROSS DR		
	City GRANGER State IN Zip Code 46530	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: IN District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>FREEDOM PROJECT; THE</b>	<b>Transaction ID:</b> SB23.14472 Date of Disbursement 08 / 10 / 2010	
	Mailing Address 509 7th Street NW Third Floor		
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement		
	Candidate Name	Category/Type	
	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>C.</b>	Full Name (Last, First, Middle Initial) <b>ELTON GALLEGLY</b>	<b>Transaction ID:</b> SB23.14474 Date of Disbursement 07 / 23 / 2010	
	Mailing Address PO BOX 940001		
	City SIMI VALLEY State CA Zip Code 93094	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: CA District: 24	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5500.00</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) <b>BOB GOODLATTE</b>	<b>Transaction ID:</b> SB23.15114
	Mailing Address 5341 Fox Ridge Rd	Date of Disbursement 09 / 09 / 2010
	City Roanoke State VA Zip Code 24018	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: VA District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>ALAN MARK GRAYSON</b>	<b>Transaction ID:</b> SB23.14444
	Mailing Address 8419 Oak Park Road	Date of Disbursement 07 / 14 / 2010
	City Orlando State FL Zip Code 32819	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: 08	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>JOHN TIMOTHY GRIFFIN</b>	<b>Transaction ID:</b> SB23.15118
	Mailing Address P.O. Box 7526	Date of Disbursement 09 / 20 / 2010
	City Little Rock State AR Zip Code 72217	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: AR District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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

<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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.14469</p> <p>Date of Disbursement <input type="text"/> 07 / <input type="text"/> 22 / <input type="text"/> 2010</p> <p>Amount of Each Disbursement this Period <input type="text"/> 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15110</p> <p>Date of Disbursement <input type="text"/> 09 / <input type="text"/> 02 / <input type="text"/> 2010</p> <p>Amount of Each Disbursement this Period <input type="text"/> 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JOHN HOEVEN</p> <p>Mailing Address 1131 NORTH 4TH STREET</p> <p>City BISMARCK State ND Zip Code 58501</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: ND District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15116</p> <p>Date of Disbursement <input type="text"/> 09 / <input type="text"/> 09 / <input type="text"/> 2010</p> <p>Amount of Each Disbursement this Period <input type="text"/> 2500.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text"/> 8500.00
<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) JOHN HARDY ISAKSON	Transaction ID: SB23.14462 Date of Disbursement 07 / 22 / 2010
	Mailing Address POST OFFICE BOX 250116	Amount of Each Disbursement this Period 2000.00
	City ATLANTA State GA Zip Code 30325	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA 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) STEVEN C LATOURETTE	Transaction ID: SB23.14466 Date of Disbursement 07 / 22 / 2010
	Mailing Address 9956 JOHNNYCAKE RIDGE	Amount of Each Disbursement this Period 1000.00
	City CONCORD TWP State OH Zip Code 44077	
	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: 14	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOSEPH I LIEBERMAN	Transaction ID: SB23.15111 Date of Disbursement 09 / 09 / 2010
	Mailing Address PO BOX 231294 STATE HOUSE SQUARE	Amount of Each Disbursement this Period 1000.00
	City HARTFORD State CT Zip Code 06123	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<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) DANIEL WILLIAM LIPINSKI	Transaction ID: SB23.15122 Date of Disbursement 09 / 20 / 2010
	Mailing Address 4501 GRAND AVENUE	Amount of Each Disbursement this Period 1000.00
	City WESTERN SPRINGS State IL Zip Code 60558	
	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) BLAINE LUETKEMEYER	Transaction ID: SB23.14461 Date of Disbursement 07 / 22 / 2010
	Mailing Address 215 MAIN STREET	Amount of Each Disbursement this Period 1000.00
	City ST ELIZABETH State MO Zip Code 65075	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) JIM MARSHALL	Transaction ID: SB23.14450 Date of Disbursement 07 / 14 / 2010
	Mailing Address P.O. Box 125	Amount of Each Disbursement this Period 1000.00
	City Macon State GA Zip Code 31201	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA 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) .....	▶	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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) <b>JIM MARSHALL</b></p> <p>Mailing Address P.O. Box 125</p> <p>City Macon State GA Zip Code 31201</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: GA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15121</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) <b>MICHAEL MCCAUL</b></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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15142</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) <b>MICHAEL E. MR. MCMAHON</b></p> <p>Mailing Address 66 Arnold Street</p> <p>City Staten Island State NY Zip Code 10301</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: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15141</p> <p>Date of Disbursement 09 / 30 / 2010</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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>RALPH BRADLEY MILLER</b>	<b>Transaction ID:</b> SB23.15123 Date of Disbursement 09 / 20 / 2010	
	Mailing Address <b>2306 BEECHRIDGE ROAD PO BOX 20307</b>		
	City <b>RALEIGH</b> State <b>NC</b> Zip Code <b>27608</b>	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 State: <b>NC</b> District: <b>13</b>	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MOVING AMERICA FORWARD</b>	<b>Transaction ID:</b> SB23.15099 Date of Disbursement 08 / 28 / 2010	
	Mailing Address <b>Post Office Box 25</b>		
	City <b>Great Falls</b> State <b>VA</b> Zip Code <b>22066</b>	Amount of Each Disbursement this Period 2500.00	
	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>ED PERLMUTTER</b>	<b>Transaction ID:</b> SB23.14451 Date of Disbursement 07 / 14 / 2010	
	Mailing Address <b>2795 JUNIPER DR</b>		
	City <b>GOLDEN</b> State <b>CO</b> Zip Code <b>80401</b>	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 State: <b>CO</b> District: <b>07</b>	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**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"/> 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) JEFFREY DAVIS PERRY	Transaction ID: SB23.15133 Date of Disbursement 09 / 29 / 2010
	Mailing Address PO BOX 1435	Amount of Each Disbursement this Period 1000.00
	City SANDWICH State MA Zip Code 02563	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PRAIRIELAND PAC	Transaction ID: SB23.15112 Date of Disbursement 09 / 09 / 2010
	Mailing Address 228 S WASHINGTON ST STE 115	Amount of Each Disbursement this Period 1000.00
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVID RIVERA	Transaction ID: SB23.14476 Date of Disbursement 07 / 23 / 2010
	Mailing Address PO BOX 520633	Amount of Each Disbursement this Period 5000.00
	City MIAMI State FL Zip Code 33152	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 25	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

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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) DAVID RIVERA</p> <p>Mailing Address PO BOX 520633</p> <p>City MIAMI State FL Zip Code 33152</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: 25</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15128</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) THOMAS JOSEPH ROONEY</p> <p>Mailing Address 18211 SE ISLAND DRIVE</p> <p>City TEQUESTA State FL Zip Code 33469</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: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.15125</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) JOHN T SALAZAR</p> <p>Mailing Address PO Box 534</p> <p>City Pueblo State CO Zip Code 81002</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: CO 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> SB23.14448</p> <p>Date of Disbursement 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

**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)

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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>MARK HAMILTON SCHAUER</b>	<b>Transaction ID:</b> SB23.14471
	Mailing Address 1795 HAMILTON ROAD	Date of Disbursement 07 / 22 / 2010
	City BATTLE CREEK State MI Zip Code 49017	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: MI District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>KURT SCHRADER</b>	<b>Transaction ID:</b> SB23.14470
	Mailing Address 2525 N BAKER DRIVE	Date of Disbursement 07 / 22 / 2010
	City CANBY State OR Zip Code 97013	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: OR District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>KURT SCHRADER</b>	<b>Transaction ID:</b> SB23.15135
	Mailing Address 2525 N BAKER DRIVE	Date of Disbursement 09 / 29 / 2010
	City CANBY State OR Zip Code 97013	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: OR District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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) <b>BRAD SHERMAN</b>	<b>Transaction ID:</b> SB23.14446
	Mailing Address 4570 VAN NUYS BLVD. #270	Date of Disbursement MM / DD / YYYY 07 / 14 / 2010
	City SHERMAN OAKS State CA Zip Code 91403	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: CA District: 27	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>STEVE STIVERS</b>	<b>Transaction ID:</b> SB23.15120
	Mailing Address 372 W SECOND AVE	Date of Disbursement MM / DD / YYYY 09 / 20 / 2010
	City COLUMBUS State OH Zip Code 43201	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: OH District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>JOHN THUNE</b>	<b>Transaction ID:</b> SB23.14465
	Mailing Address 224 NORTH PHILLIPS AVENUE	Date of Disbursement MM / DD / YYYY 07 / 22 / 2010
	City SIOUX FALLS State SD Zip Code 57104	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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) .....	<b>77000.00</b>