

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 19 P 1:47

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Free Cuba PAC, Inc.	2. FEC IDENTIFICATION NUMBER C00142117
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2695 Le Jeune Road - 3rd Floor	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Coral Gables, FL 33134	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

Amendment to 1999 Year End Report

- (b) Is this Report an Amendment? YES NO

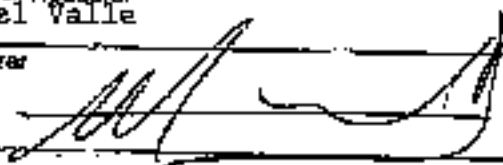
SUMMARY

5. Covering Period <u>7/1/1999</u> through <u>9/30/1999</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19_____		
(b) Cash on Hand at Beginning of Reporting Period	\$ 2533.12	
(c) Total Receipts (from Line 19)	\$ 13685.00	\$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 16218.12	\$
7. Total Disbursements (from Line 30)	\$ 8835.00	\$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 7383.12	\$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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
Mario L. Del Valle

Signature of Treasurer



Date
7/16/01

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

FEC FORM 3X

(revised 9/03)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
I Receipts			
11. Contributions (other than loans) From:	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
a. Individual/Persons Other Than Political Committees	13685.00		11(a)
i. Itemized (use Schedule A)			11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	13685.00		11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)			11(d)
d. Total Contributions (add a ii, b and c) >	13685.00		11(e)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	13685.00		19
20. Total Federal Receipts (subtract line 18 from line 19) >	13685.00		20
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements	8920.94		29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	8920.94		30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	8920.94		31
III Net Contributions Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	13685.00		32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	13685.00		34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**

FOR LINE NUMBER

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)
Free Cuba PAC, Inc.

①

A. Full Name, Mailing Address and ZIP Code Ana Maria Moreira 500 San Juan Drive Coral Gables, Fla. 33143	Name of Employer	Date (month, day, year) 7/1/99	Amount of Each Receipt this Period \$2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

②

B. Full Name, Mailing Address and ZIP Code Ricardo Gonzalez 8780 S.W. 92 St. Miami, Fla. 33176	Name of Employer	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.M.	Aggregate Year-to-Date > \$	

C. Full Name, Mailing Address and ZIP Code Manuel Vazquez 2655 LeJeune Road Suite 503 Coral Gables, Fla. 33134	Name of Employer	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$	

D. Full Name, Mailing Address and ZIP Code Carlos Quintela Key Biscayne, Fla. 33149	Name of Employer	Date (month, day, year) 7/15/99	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

E. Full Name, Mailing Address and ZIP Code Dellin PARNAS 11865 S. W. 26 St. #B-14 Miami, Fla. 33175	Name of Employer	Date (month, day, year) 7/16/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

F. Full Name, Mailing Address and ZIP Code Nicolas Valls 151 Crandon Blvd. Apt. 837 Key Biscayne, Fla 33149	Name of Employer	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

G. Full Name, Mailing Address and ZIP Code Julio Piche 7148 S.W. 88th Miami, Fla. 33144	Name of Employer	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in full)
Free Cuba PAC, Inc.

(2) A. Full Name, Mailing Address and ZIP Code Mirta Iglesias 90 Grand Canal Dr. Miami, Fla. 33144	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	7/16/99	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code Jesus Garcia 890 Alfonso Ave. Coral Gables, Fla. 33146	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$200.00
	Occupation	7/16/99	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code Jose Puig 10951 S.W. 72 Terr. Miami, Florida 33173	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$200.00
	Occupation	7/16/99	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code Oscar Gonzalez 600 Grapetree Dr. Key Biscayne, Fla. 33149	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$250.00
	Occupation MD	7/16/99	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code Eduardo Crews 600 Grapetree Dr. Key Biscayne, Fla. 33149	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$150.00
	Occupation	7/16/99	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code Kirk R. Menendez 346 Malaga Ave. Coral Gables, Fla 33134	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	7/16/99	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) \$1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Free Cuba PAC, Inc.

2

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eduardo Blanco 305 Harbor Dr. Key Biscayne, Fl. 33149		7-16-99	\$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$ 6			
B. Full Name, Mailing Address and ZIP Code Guillermo & Mariana Quirch 8200 S.W. 52nd Ave. Miami, Fl 33143		7-16-99	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code Raul Torano 345 Harbour Lane Key Biscayne, Fla 33149		7/16/99	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code Luis M. Fernandez 600 Grapetree Dr. Key Biscayne, Fla. 33149		7/16/99	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code Tony Trelles P.O.Box 6035 San Juan, Puerto Rico 00914-6035		7/16/99	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code Israel Marnol 3854 Alcantara Ave. Coral Gables, Fla. 33178		7/17/99	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code Feliciano Foyo 5915 Granada Blvd. Coral Gables, Fla. 33146		7/17/99	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) \$1150.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
Free Cuba PAC, Inc.

3

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rafael E. Gomez Jr. 1222 Molokai Rd. Jacksonville, Fla 32216		7/17/99	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maria E. Costa 9355 S.W. 98 St. Miami, Fla.		7/16/99	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Francisco Hernandez/Ana V. Hernandez 8201 S.W. 100 St. Miami, Fla. 33158		7/16/99	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carlos A. Saladrigas 11000 S.W. 83 Ave. Miami, Florida 33156		7/16/99	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ana R. Craft 14738 S. W. 50 Terr. Miami, Fla. 33185		7/16/99	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arnaldo Monson New Jersey, N.J.		7/17/99	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerardo Abascal San Juan, Puerto Rico		7/14/99	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) \$1400.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)
Free Cuba PAC, Inc.

3

A. Full Name, Mailing Address and ZIP Code Luis Pons New York City, N.Y.		Name of Employer Occupation	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Marco E. Rojas 1901 Brickell Ave. 1001 Miami, Fla. 33129		Name of Employer Occupation	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Lesley R. Romney 8230 N.E. 8 Place Miami, Fla 33130		Name of Employer Occupation	Date (month, day, year) 7/14/99	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code Ramon E. Mas 6350 S.W. 114 St. Pinecrest, Fla. 33156		Name of Employer Occupation	Date (month, day, year) 7/12/99	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Alina F. Garrido 7151 Lago Drive West Coral Gables, Fla. 33143		Name of Employer Occupation	Date (month, day, year) 7-1699	Amount of Each Receipt this Period \$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Francisco Hernandez 8201 SW 100 St. Miami, Fla. 33156		Name of Employer Occupation	Date (month, day, year) 7-16-99	Amount of Each Receipt this Period \$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code Alberto M. Hernandez 1 Grove Isle #1208 Coconut Grove, Fl. 33133		Name of Employer Occupation	Date (month, day, year) 7-16-99	Amount of Each Receipt this Period \$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) **\$1000.00**

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NAME OF COMMITTEE (in Full)
Free Cuba PAC, Inc.

③

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lombardo Perez 9000 NW 7 Ave. Miami, Fl. 33150		7-16-99	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$
B. Full Name, Mailing Address and ZIP Code Carlos M. de Caspedes 6819 Sunrise Place Coral Gables, Fl. 33133		7-16-99	\$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$
C. Full Name, Mailing Address and ZIP Code Marco E. Rojas 1901 Brickell Ave. No. 1011 Miami, Fl. 33129		7-16-99	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$
D. Full Name, Mailing Address and ZIP Code Doris Cruz 6965 Granada Blvd. Coral Gables, Fla. 33146		7-16-99	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$
E. Full Name, Mailing Address and ZIP Code Ralph Santa Cruz 6215 SW 147 Terr. Miami, Fl. 33158		7-16-99	\$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$
F. Full Name, Mailing Address and ZIP Code Ramberto Perez 123 Knickerbocker Rd. Tenafly, NJ 07670		7-16-99	\$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$
G. Full Name, Mailing Address and ZIP Code Sylvia G. Irtondo 881 Ocean Drive Apt. 8 A Key Biscayne, Fl. 33149		7-16-99	\$100
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional) \$1000.00

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NAME OF COMMITTEE (in Full)
Free Cuba PAC, Inc.

4

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jose R. Juara 687 Harbour Lane Key Biscayne, Fla. 33149		7/17/99	\$280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Montserrat C. Gomez 1222 Molokai Rd. Jacksonville, Fla. 32216		7/18/99	\$280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vivian R. Sanchez 1 Grove Isle #1208 Coconut Grove, Fla. 33133		7/17/99	\$600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eduardo Blanco 305 Harbor Drive Key Biscayne Fla. 33149		7/17/99	\$875.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rosa E. Noriega Key Biscayne, Fla. 33149		7/15/99	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jose ruig P.O. BOX 192179 San Juan, Puerto Rico 00919		7/17/99	\$150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ana V. Hernandez 8201 S.W. 100 St. Miami, Florida 33156		7/16/99	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$2735.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **546** OF
FOR LINE NUMBER

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)
Free Cubs PAC, Inc.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
5 Horacio S. Garcia 8390 N.W. 53 St. #314 Miami, Florida 33166 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$	7/21/99	\$350.00
6 Horacio S. Garcia 8390 S.W. 53 St. #314 Miami, Fla. 33166 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date > \$	Date (month, day, year) 7/16/99	Amount of Each Receipt this Period \$800.00
7 Victor A. Delgado 3620 Granada Blvd. Coral Gables, Fla. 33134 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date > \$	Date (month, day, year) 7/17/99	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) \$1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Free Cuba PAC, Inc.

3 A. Full Name, Mailing Address and ZIP Code Alberto J. Marino P.O. Box 522518 Miami, FL, 33152-2518	Name of Employer	Date (month, day, year) 7-16-99	Amount of Each Receipt This Period \$200
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
8 B. Full Name, Mailing Address and ZIP Code Juan A. Gutierrez 1907 Mizzen Rd. Tom River, N.J. 08753-3111	Name of Employer	Date (month, day, year) 7/22/99	Amount of Each Receipt This Period \$100.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
8 C. Full Name, Mailing Address and ZIP Code Rosa E. Noriega Key Biscayne, Fla. 33134	Name of Employer	Date (month, day, year) 7/20/99	Amount of Each Receipt This Period \$100.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
9 D. Full Name, Mailing Address and ZIP Code Michael A. Ortoll 46 W. Cypress St. Tampa, Florida 33607	Name of Employer	Date (month, day, year) 9/09/99	Amount of Each Receipt This Period \$300.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
10 E. Full Name, Mailing Address and ZIP Code Manuel Vazquez 2655 LeJeune Rd. Suite 503 Coral Gables, Florida 33134	Name of Employer	Date (month, day, year) 9/27/99	Amount of Each Receipt This Period \$200.00
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Receipts This Page (optional)	\$900.00
TOTAL This Period (last page this line number only)	\$13685.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Free Cuba PAC, Inc.

<p>A. Full Name, Mailing Address and ZIP Code Miami Son P.O. Box 546065 Surfside, FL 33154</p>	<p>Purpose of Disbursement Fundraising</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 7/16/99</p>	<p>Amount of Each Disbursement This Period \$750.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Hecto Vidal 11481 S.W. 40th Terrace Miami, Florida</p>	<p>Purpose of Disbursement Fundraising</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 7/22/99</p>	<p>Amount of Each Disbursement This Period \$2085.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Doral Golf Resort 8755 N.W. 36th Street Miami, FL 33178</p>	<p>Purpose of Disbursement Fundraising</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 7/29/99</p>	<p>Amount of Each Disbursement This Period \$5000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Continental Brass Band 7201 S.W. 7th Street Miami, Florida 33144</p>	<p>Purpose of Disbursement Fundraising</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 7/29/99</p>	<p>Amount of Each Disbursement This Period \$1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Union Planters Bank P.O. Box 522800 Miami, FL 33152</p>	<p>Purpose of Disbursement Bank ACH</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 8/10/99</p>	<p>Amount of Each Disbursement This Period \$36.62</p>
<p>F. Full Name, Mailing Address and ZIP Code Union Planters Bank P.O. Box 522800 Miami, FL 33152</p>	<p>Purpose of Disbursement Bank Debit</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 8/11/99</p>	<p>Amount of Each Disbursement This Period \$6.63</p>
<p>G. Full Name, Mailing Address and ZIP Code Union Planters Bank P.O. Box 522800 Miami, FL 33152</p>	<p>Purpose of Disbursement Bank Debit</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 9/13/99</p>	<p>Amount of Each Disbursement This Period \$6.07</p>
<p>H. Full Name, Mailing Address and ZIP Code Union Planters Bank P.O. Box 522800 Miami, FL 33152</p>	<p>Purpose of Disbursement Bank ACH</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 9/13/99</p>	<p>Amount of Each Disbursement This Period \$36.62</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$8920.94

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 7-16-01
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>Al</i> PREPARER	 7-23-01 DATE PREPARED