

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 U.S.-Cuba Democracy Political Action Committee

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

2. FEC IDENTIFICATION NUMBER C C00387720 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2016 through 03 / 31 / 2016

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 Mr. Gus Machado [Electronically Filed] Date 04 / 14 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

U.S.-Cuba Democracy Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="247435.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="247435.07"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="91100.00"/>	<input type="text" value="91100.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="338535.07"/>	<input type="text" value="338535.07"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="62395.60"/>	<input type="text" value="62395.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="276139.47"/>	<input type="text" value="276139.47"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

U.S.-Cuba Democracy Political Action Committee

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 31 / 2016

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).....	90100.00	90100.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	90100.00	90100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶	90100.00	90100.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	91100.00	91100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	91100.00	91100.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1395.60	1395.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1395.60	1395.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	61000.00	61000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	62395.60	62395.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62395.60	62395.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	90100.00	90100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90100.00	90100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1395.60	1395.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1395.60	1395.60

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Dr. Alejandro Centurion
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Clock Tower Place
 Apt. 225
 City Carmel State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Neurologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.19458
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Mr. Carlos Centurion
 Full Name (Last, First, Middle Initial)
 Mailing Address 2951 South Bayshore Drive
 Suite 605
 City Miami State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Restaurant Owner
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016
Transaction ID : SA11AI.19454
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Mr. Fausto Alex Diaz
 Full Name (Last, First, Middle Initial)
 Mailing Address One Grove Isle
 #306
 City Miami State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation All American Containers, Inc Sales Representative
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA11AI.19460
 Amount of Each Receipt this Period
 5000.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<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. Mr. Fausto G. Diaz Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 9743 S.W. 57th Street

City Miami	State FL	Zip Code 33173
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FEC ID number of contributing federal political committee. **C**

Name of Employer All American Containers, Inc.	Occupation Vice-President
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2016

Transaction ID : SA11AI.19443

Amount of Each Receipt this Period
5000.00

Memo Item

B. Mrs. Rosa Maria Diaz
Full Name (Last, First, Middle Initial)
Mailing Address 9817 S.W. 58th Street

City Miami	State FL	Zip Code 33173
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FEC ID number of contributing federal political committee. **C**

Name of Employer All American Containers	Occupation Senior VP
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11AI.19459

Amount of Each Receipt this Period
5000.00

Memo Item

C. Mrs. Remedios Diaz-Oliver
Full Name (Last, First, Middle Initial)
Mailing Address 10000 S.W. 30th Street

City Miami	State FL	Zip Code 33165
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FEC ID number of contributing federal political committee. **C**

Name of Employer All American Containers	Occupation President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2016

Transaction ID : SA11AI.19442

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Mr. Marcell Felipe
Full Name (Last, First, Middle Initial)

Mailing Address 1155 Brickell Bay Drive
Apt. 704

City Miami State FL Zip Code 33131

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

Name of Employer Marcell Felipe, P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 30 / 2016
Transaction ID : SA11AI.19457

Amount of Each Receipt this Period
1000.00

Memo Item

B. Mr. Daniel Hernandez
Full Name (Last, First, Middle Initial)

Mailing Address 9350 S.W. 93rd Place

City Miami State FL Zip Code 33176

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

Name of Employer H4 Holdings Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
01 / 25 / 2016
Transaction ID : SA11AI.19441

Amount of Each Receipt this Period
2100.00

Memo Item

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

Mailing Address 9350 S.W. 93rd Place

City Miami State FL Zip Code 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 ▼
5000.00

Date of Receipt
03 / 28 / 2016
Transaction ID : SA11AI.19446

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 8100.00

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 9 OF 21
<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. Dr. Rodolfo Hernandez
Full Name (Last, First, Middle Initial)

Mailing Address 9350 S.W. 93rd Place

City Miami	State FL	Zip Code 33176
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FEC ID number of contributing federal political committee. **C**

Name of Employer Psychcare, Inc.	Occupation President
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : SA11AI.19448

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 9789 N.W. 45th Lane

City Miami	State FL	Zip Code 33178
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : SA11AI.19447

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1200 West 49th Street

City Hialeah	State FL	Zip Code 33012
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FEC ID number of contributing federal political committee. **C**

Name of Employer Gus Machado Enterprises	Occupation President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2016

Transaction ID : SA11AI.19451

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
<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. Mrs. Lilliam Machado
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Grove Isle Drive #804
 City Miami State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: MGM Advertising Agency Occupation: President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt: 03 / 30 / 2016
Transaction ID : SA11AI.19452
 Amount of Each Receipt this Period: **5000.00**
 Memo Item

B. Mrs. Madeleine Munilla
 Full Name (Last, First, Middle Initial)
 Mailing Address 7277 Sunset Drive
 City Miami State FL Zip Code 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 **5000.00**

Date of Receipt: 03 / 28 / 2016
Transaction ID : SA11AI.19453
 Amount of Each Receipt this Period: **5000.00**
 Memo Item

C. Mr. Pedro Munilla
 Full Name (Last, First, Middle Initial)
 Mailing Address 7277 Sunset Drive
 City Miami State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: MCM Construction Occupation: Vice-President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt: 03 / 29 / 2016
Transaction ID : SA11AI.19450
 Amount of Each Receipt this Period: **5000.00**
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 11 OF 21
(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. Mr. Carlos A. Penin
Full Name (Last, First, Middle Initial)
Mailing Address 6410 Granada Blvd.
City Coral Gables State FL Zip Code 33146
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAS Group President
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2016
Transaction ID : SA11AI.19456
Amount of Each Receipt this Period
2000.00
 Memo Item

B. Mrs. Anolan Ponce
Full Name (Last, First, Middle Initial)
Mailing Address 188 Isla Dorada Drive
City Coral Gables State FL Zip Code 33143
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
MGR Real Estate Commercial Agent
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2016
Transaction ID : SA11AI.19449
Amount of Each Receipt this Period
5000.00
 Memo Item

C. Mr. Victor Pujals
Full Name (Last, First, Middle Initial)
Mailing Address 1915 Brickell Avenue Apt. 401-C
City Miami State FL Zip Code 33129
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CDM, Corp. Engineer
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2016
Transaction ID : SA11AI.19445
Amount of Each Receipt this Period
5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 12000.00
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 12 OF 21
(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. Mr. Roberto Sanchez
Full Name (Last, First, Middle Initial)
Mailing Address 1790 Bay Drive

City Miami Beach	State FL	Zip Code 33141
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FEC ID number of contributing federal political committee. **C**

Name of Employer Health Care Consulting Service	Occupation President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2016

Transaction ID : SA11AI.19444

Amount of Each Receipt this Period
5000.00

Memo Item

B. Mrs. Vivian Williams
Full Name (Last, First, Middle Initial)
Mailing Address 648 Palermo Ave.

City Coral Gables	State FL	Zip Code 33134
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FEC ID number of contributing federal political committee. **C**

Name of Employer Cantera & Associates	Occupation President
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2016

Transaction ID : SA11AI.19455

Amount of Each Receipt this Period
5000.00

Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	90100.00

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

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

FOR LINE NUMBER: PAGE 13 OF 21
(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. TIMOTHY E SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1405 ASHLEY RIVER ROAD
 City CHARLESTON State SC Zip Code 29407
 FEC ID number of contributing federal political committee. **C** S4SC00240
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : SA16.19480
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Excessive Contribution

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

Full Name (Last, First, Middle Initial)

A. PayPal, Inc.

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
PAC-Only Contributions Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.19461

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. ALAMO PAC

Mailing Address 919 CONGRESS AVENUE
SUITE 1400

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SB23.19485

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BRADLEY ROBERTS BYRNE

Mailing Address 22489 SEA CLIFF DRIVE

City FAIRHOPE State AL Zip Code 36532

Purpose of Disbursement

Candidate Name

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SB23.19474

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KAY GRANGER

Mailing Address 715 JONES STREET, SUITE 101

City FORT WORTH State TX Zip Code 76102

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: TX District: 12

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 18 / 2016

Transaction ID : SB23.19464

Amount of Each Disbursement this Period

4000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

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

Full Name (Last, First, Middle Initial)

A. KAY GRANGER

Mailing Address 715 JONES STREET, SUITE 101

City State Zip Code
FORT WORTH TX 76102

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TX District: 12

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 18 / 2016

Transaction ID : SB23.19465

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CRESENT HARDY

Mailing Address PO BOX 753941

City State Zip Code
LAS VEGAS NV 89136

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NV District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2016

Transaction ID : SB23.19462

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RONALD HAROLD JOHNSON

Mailing Address 219 E WASHINGTON AVE. SUITE 101

City State Zip Code
OSHKOSH WI 54901

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SB23.19482

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

8000.00

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

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

FOR LINE NUMBER:
(check only one)

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

Full Name (Last, First, Middle Initial)

A. ROB PORTMAN

Mailing Address 825 MIAMI AVENUE

City TERRACE PARK State OH Zip Code 45174

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: OH District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 16 / 2016

Transaction ID : SB23.19467

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ROB PORTMAN

Mailing Address 825 MIAMI AVENUE

City TERRACE PARK State OH Zip Code 45174

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: OH District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 16 / 2016

Transaction ID : SB23.19469

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PROJECT WEST POLITICAL ACTION COMMITTEE

Mailing Address 9227 EAST LINCOLN AVENUE #200-435

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : SB23.19483

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

11000.00

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

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

FOR LINE NUMBER:
(check only one)

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

Full Name (Last, First, Middle Initial)

A. ED MR ROYCE

Mailing Address P.O. Box 2525

City Orange State CA Zip Code 92859

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 40

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2016

Transaction ID : SB23.19481

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PAUL D. RYAN

Mailing Address PO BOX 771

City JANESVILLE State WI Zip Code 53547

Purpose of Disbursement

Candidate Name

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SB23.19470

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TIMOTHY E SCOTT

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: SC District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2016

Transaction ID : SB23.19478

Amount of Each Disbursement this Period

4000.00

Memo Item

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

14000.00

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

Full Name (Last, First, Middle Initial)

A. TIMOTHY E SCOTT

Mailing Address 1405 ASHLEY RIVER ROAD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: SC District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SB23.19479

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER H SMITH

Mailing Address PO BOX 3184

City HAMILTON State NJ Zip Code 08619

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NJ District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SB23.19473

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PATRICK JOSEPH TOOMEY

Mailing Address 5250 WHEATLAND DR

City ZIONSVILLE State PA Zip Code 18092

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : SB23.19475

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

8500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Full Name (Last, First, Middle Initial)

A. PATRICK JOSEPH TOOMEY

Mailing Address 5250 WHEATLAND DR

City ZIONSVILLE State PA Zip Code 18092

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: PA District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : SB23.19476

Amount of Each Disbursement this Period

5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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

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

5000.00

61000.00
