24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Treasure Coast Committee	
	C C00621318
Check if 24-hour report X 48-hour report New report Amends report filed	d on M M / D D / Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
icTV1.com	07 28 2016
Mailing Address P.O. Box 725	07 28 2016
	Amount
City State Zip Code	33121.00
Palm Beach FL 33480	Transaction ID : SE.4111
Purpose of Expenditure PAC digital advertising, printing and postage Category/ Type 004	Date of Disbursement or Obligation O7 21 2016
Name of Federal Candidate Support Offic	te Sought: X House District: 18
MARC BENJAMIN FREEMAN Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disb. 2016	pursement For: X Primary General
The action of th	U Other (specify) ►
Full Name of Payee icTV1.com	Date of Public Distribution/Dissemination
	08 04 2016
Mailing Address P.O. Box 725	Amount
City State Zip Code	22076.00
Palm Beach FL 33480	Transaction ID : SE.4110 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/	Mam / Dad / Yayayay
PAC digital advertising, printing and postage. Outgoing 004 Type Outgoing 004	07 29 2016
Name of Federal Candidate Support Office	ce Sought: X House District: 18
MARC BENJAMIN FREEMAN Oppose	President Senate State: FL
55107.00	oursement For: X Primary General
Per Election for Office Sought 55197.00	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	55197.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	55197.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
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Signature	