FEC FORM 1	STATEMEN ORGANIZ		Office	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Treasure Coast	Commitee]
ADDRESS (number and street)	510 King Street Suite 350			
(Check if address				
is changed)	Alexandria		VA 22314	
			STATE A	
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)	mtamargo@pobletetan	nargo.com		
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE A (Check if address is changed)				
2. DATE 07 /	06 / Y Y Y Y 2016			
3. FEC IDENTIFICATION	NUMBER ► C C	00621318		
4. IS THIS STATEMENT	X NEW (N) OR	AMENDED (A)		
I certify that I have examined	I this Statement and to the best	of my knowledge and belief it	is true, correct and co	omplete.
Type or Print Name of Treasu	Irer Mauricio Tamargo			
Signature of Treasurer	uuricio Tamargo	[Electronically Filed]	Date 07	06 / Y Y Y Y 06 2016
NOTE: Submission of false, err	oneous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing ON SHOULD BE REPORTED V		nalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion F	EC FORM 1 Revised 06/2012)

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		OMMITTEE
	ndidate	e Committee:
(a)	<u> </u>	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
	ne of didate	Dr Mark Freeman
	didate y Affiliati	on Office State State Sought: House Senate President
		District
(C)	\times	This committee supports/opposes only one candidate, and is NOT an authorized committee.
	ne of didate	
Par	ty Con	nmittee:
(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joir	nt Func	Iraising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4.	FEC ID number

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Write or Type Committee Name

Treasure Coast Commitee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address																										
																	L	_	_				- [
							CIT	Y						ST	AT	E				Z	IP	СС	DDI	E		
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor																										

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Mauricio T	amargo
Full Name	
Mailing Address	PobleteTamargo LLP
	510 King Street Suite 350
	Alexandria
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 703 566 3037

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Mauricio Tamargo
Mailing Address	PobleteTamargo LLP
	510 King Street Suite 350
	Alexandria
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 703 566 3037

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Full Name of Designated Agent																		1			1				I		1			_
Mailing Address																														
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						1	I	1		1										I				1		1]-			
	CITY									STATE ZIP CODE																				
Title or Position																														
														Tele	eph	ione	e ni	umt	ber				_							

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Burke	& Herbert Bank		
Mailing Address	P.O. Box 268		
	Alexandria	VA 223	13
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE