FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Hector Ferrer Comisionado

ADDRESS (number and street) 403 Ave Constitucion

☒ ◄ (Check if address is changed)

San Juan (CITY ▲) PR (STATE ▲) 00906 – (ZIP CODE ▲)

COMMITTEE'S E-MAIL ADDRESS

☐ ◄ (Check if address is changed) hectorferrercomisionado@gmail.com

Optional Second E-Mail Address hecferrer@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◄ (Check if address is changed)

2. DATE 01 / 15 / 2016

3. FEC IDENTIFICATION NUMBER ▶ C C00604934

4. IS THIS STATEMENT ☐ NEW (N) **OR** ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Vazquez-Mestre, Guelmarie, , ,

Signature of Treasurer *Vazquez-Mestre, Guelmarie, , ,* ***[Electronically Filed]*** Date 10 / 13 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

5. TYPE OF COMMITTEE

Candidate Committee:

(a) [X] 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.)

Name of Candidate: Ferrer-Rios, Hector, , ,

Candidate Party Affiliation: DEM

Office Sought: [X] House [ ] Senate [ ] President

State: PR

District: 00

(c) [ ] This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate:

Party Committee:

(d) [ ] This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action 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.)

Joint Fundraising 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.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C

2. _____ FEC ID number C

3. _____ FEC ID number C

4. _____ FEC ID number C

Write or Type Committee Name

Hector Ferrer Comisionado

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

NONE

Mailing Address

CITY STATE ZIP CODE

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.

Full Name: Vazquez-Mestre, Guelmarie, , ,

Mailing Address: 21 calle Lucero

Urb Los Angeles

Carolina | PR | 00979

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 787 – 648 – 6015

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: Vazquez-Mestre, Guelmarie, , ,

Mailing Address: 21 calle Lucero

Urb Los Angeles

Carolina | PR | 00979

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 787 – 648 – 6015

Full Name of Designated Agent

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number

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.

Banco Popular

Mailing Address Galeria Paseos

San Juan PR 00926

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **F1A**
Transaction ID :

Response to the request for additional information: This statement is submitted in order to provide clarification regarding the date of filing of FEC Form 1. After the designation of the committee and at the time of submitting form 1, a conflict of interest involving one of the appointments of the committee was identified, hence, the submission of the form was delayed. The evaluation of the conflict stated before and the appropriateness of that appointment took time and a legal evaluation. After such legal evaluation, it was decided to avoid any conflicts and another appointment had to be made. This new appointment was done by the candidate as soon as possible, but unfortunately because of the candidate's health situation (this is a matter of public knowledge in Puerto Rico) it was impossible to file form 1 by the due date. It is our interest to inform the Commission that we will comply with all the regulations of the Act and respectfully ask that this response be accepted.

Form/Schedule:
Transaction ID: