Image#	28990718490
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FEC FORM 1		STATEME ORGANIZ (See instruct	ATION	Office use	only
1. NAME OF COMMITTEE (in 1	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Hal Valeche fo	r Congress				
ADDRESS (number and s	street)	521 PGA Blvd, #3	99 		
(Check if addre	ess				
is changed)		alm Beach Garde	ns		418
COMMITTEE'S E-MAI			CITY	STATE	ZIP CODE 🔺
COMMITTEE'S WEB	PAGE ADDRES	S (URL)			
COMMITTEE'S FAX N 5618402726					
2. DATE <b>M</b> M		Y Y Y Y Y 2007			
3. FEC IDENTIFICA	TION NUMBER		C C00432476	]	
4. IS THIS STATEM	IENT	NEW (N) OR	X 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	Deborah A. Dia	IZ		
Signature of Treasurer	Electronically	Filed by <b>Deborah</b>	A. Diaz	Date <b>03</b> / D	<sup>D</sup> / Y Y Y Y 28 / 2008
NOTE: Submission of fal			nay subject the person signing this State		S.C. S437g.
Office			For further information of	contact:	

(	Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2003)
			Local 202-694-1100	

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5. TYPE OF COMMITTEE (C	Check One)	
(a) X This comm	nittee is a principal campaign committee. (Complete the candidate information belo	w.)
(b) This comm information	nittee is an authorized committee, and is NOT a principal campaign committee. (Con below.)	omplete the candidate
Name of <b>Hal</b> Candidate		
Candidate Party Affiliation	Office X House Senate Pre	State FL District 16
(c) This commit	ittee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
(d) This commit	ittee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
(e) This commit	ittee is a separate segregated fund	
(f) This commit committee.	ittee supports/opposes more than one Federal candidate, and is NOT a separate s	egregated fund or party
6. Name of Any Connected	Organization or Affiliated Committee	
1		1
Mailing Address		
	$ \begin{tabular}{cccccccccccccccccccccccccccccccccccc$	
	CITY STATE	ZIP CODE
Relationship		
Type of Connected Organiz	zation:	
Corporation	Corporation w/o Capital Stock Lab	oor Organization
Membership Orga	anization Trade Association Cod	operative

FEC Form	1 (Revised 02/20	)03)		Page <b>3</b>
/rite or Type Com	nittee Name			
	for Congress			
		fy by name, address, (phone number o oks and records.	ptional), and position of the	he person in
Full Name	Deborah /	<b>A. Diaz</b>		
Mailing Address	_	223 Sunset Avenue		
	_	Palm Beach	FL	33480 _
Title or Position	¥	CITY A	STATE	ZIP CODE 🛦
	Treasurer	т	561	
Treasurer: Lis name and add Full Name of Treasurer	dress of any de	signated agent (e.g., assistant treasurer) <b>A. Diaz</b>		
name and add Full Name	dress of any de	signated agent (e.g., assistant treasurer)		
name and add Full Name of Treasurer	dress of any de	signated agent (e.g., assistant treasurer) <b>A. Diaz</b>	<u>FL</u>	
name and add Full Name of Treasurer	dress of any de <b>Deborah</b> / 	esignated agent (e.g., assistant treasurer) A. Diaz 223 Sunset Avenue		<u>33480</u> – ZIP CODE ▲
name and add Full Name of Treasurer Mailing Address	dress of any de <b>Deborah</b> / 	A. Diaz 223 Sunset Avenue Palm Beach CITY A	FL	
name and add Full Name of Treasurer Mailing Address	dress of any de <u>Deborah</u> — — —	A. Diaz  223 Sunset Avenue  Palm Beach  CITY  T		ZIP CODE 🛦
Full Name of Treasurer Mailing Address Title or Position	dress of any de Deborah / 	A. Diaz  223 Sunset Avenue  Palm Beach  CITY  T		ZIP CODE A
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	dress of any de Deborah / 	A. Diaz  223 Sunset Avenue  Palm Beach  CITY  T		ZIP CODE A
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	dress of any de 	A. Diaz  223 Sunset Avenue  Palm Beach  CITY A  T  he  7615 Steeplechase Drive	FL STATE▲ elephone number561	ZIP CODE A

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	5

 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.

	Bank of America		
Mailing Address	P O Box 25118		
	Tampa		33622
	CITY 🗖	STATE	ZIP CODE 🔺
Name of Bank, Deposi	itory, etc.		
Mailing Address	1446 Albemarte Pointe Place		
	Ste 100		
	<b>Chantilly</b>	VA	20151
		STATE 4	ZIP CODE

 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.
 Image: Committee depositories of bank, begository, etc.

 Name of Bank, Depository, etc.
 Image: Committee depositories of bank, begository, etc.

Mailing Address	ning, LLC PO Box 73748			    
	Prganization or Affiliated C	ommittee	<b>A</b> ]	DDITIONAL ]
Mailing Address				□
Relationship          Type of Connected Organization       Corporation         Membership Organ	tion:	orporation w/o Capital Stock	Labor Organ	

## Image# 28990718495

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Designated Agent			[ ADDITIONAL ]
Full Name			
Title or Position ▼	CITY A	STATE	ZIP CODE
		Telephone number	