Image# 202208249528240546			08/24/2022 13 : 20	
FEC FORM 1	STATEMEN ORGANIZA		Office Use Only	
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	2 Civic Center Drive			
<ul><li>(Check if address is changed)</li></ul>	<b>#4338</b>			
	San Rafael		CA 94913-5703 – L	
	CITY ▲		STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDRES		<i></i>		
<ul><li>(Check if address is changed)</li></ul>	tom@politicalcommunic			
	Optional Second E-Mail Addr	ess		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
(Check if address is changed)				
2. DATE 08 / 24	D / Y Y Y Y 2022			
3. FEC IDENTIFICATION NU		763466		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	is Statement and to the best o	f my knowledge and belief it	is true, correct and complete.	
Type or Print Name of Treasurer	Montgomery, Thomas, , , III			
Signature of Treasurer	omery, Thomas, , , III	[Electronically Filed]	Date 08 24 2022	Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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	FEC FORM 1 (Revised 06/2012)
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Form	1 (Revised 03/2022) Page 2
TYPE	OF COMMITTEE:
Candi	date Committee:
(a)	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 Cand	
Cand Party	idate Office Sought: House Senate President District 00
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
	ne of ndidate
Party	Committee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party
(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.     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.)
(g)	This committee is an independent expenditure-only political committee (Super PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.
(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

## 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.

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

(j)

1.	<b>C</b> C00764332	 
2.	С	 

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	FEC Form 1 (Revised 02/2009)	Page 3	
V	Vrite or Type Committee Name		
	Tamika PAC (Multi Candidate)		
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Spo	nsc

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

Montgomer	ry, Thomas, , , III
Full Name	
Mailing Address	
	#4338 
	San Rafael CA 94913-5703
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Record Keeper	Telephone number 415 - 250 - 4036

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	Montgomery, Thomas, , , III
of Treasurer	
Mailing Address	2 Civic Center Drive
	#4338 
	San Rafael   CA   94913-5703
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image: Telephone number 415 - 250 - 4036

FEC Form 1 (Revised 02	2/:	20	09	9)																						Pa	ge ·	4	
Full Name of Designated Agent																													
Mailing Address	L																												
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Title or Position ▼																													
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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.

U.S. B	ank		
Mailing Address	305 San Anselmo Avenue		
	San Anselmo	CA 94960	
	CITY A	STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲