

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

OFFICE USE ONLY

19 MAY 15 PM 3:00

1. Full Name of Committee

SAFEBOR

Telephone

332-2385
352-316-4705

Mailing Address (include city, state and zip code)

927 SW 60 Terrace Apt B Gainesville FL 32607

Street Address (include city, state and zip code)

SAME

2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Name of Affiliated or Connected Organization	Mailing Address	Relationship
none		

3. Area, Scope and Jurisdiction of the Committee

Charter amendment promotion in Alachua County

4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)

Charter amendment promotion in Alachua County

5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)

Full Name	Mailing Address	Committee Title or Position
Michael J. Roth	846 NW 120 Trail Branford, Florida 32008	Treasurer

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)

Full Name	Mailing Address	Committee Title or Position
David W. Moritz	927 SW 60th Terr Apt B Gainesville 32607	Chair
Lucinda Merritt	209 SW Powers Glen, Ft. White 32038	Secretary
John Moran	1327 SE 69 Way, Gainesville 32641	Advisor Vice Chair
Merrilee Malwitz-Jipson	460 SW Riverland Ct, Ft. White 32038	Advisor Vice Chair

7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)

Full Name	Mailing Address	Office Sought	Party
none			

8. List Any Issues this Committee is Supporting: Rights of Nature for Santa Fe River

List Any Issues this Committee is Opposing: none

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party

n/a

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?
donation to environmental 501(c)(3) organization(s)

11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds

Name of Bank or Depository & Account Number	Mailing Address
Capital City Bank At 063106688 Ac 10000547967	18467 NW US Hwy 441, Suite 100 High Springs, FL 32643

12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
None			

STATE OF FLORIDA COUNTY ALACHUA

I, David Moritz, certify that the information in this Statement of Organization is complete, true and correct.

X David Moritz
Signature of Chairman of Political Committee

May 8, 2019
Date