

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

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1. Full Name of Committee

Collaborative Community Caucus

Telephone

850 933 1524

Mailing Address (include city, state and zip code)

413 NW 3rd Ave Gainesville, FL 32601

Street Address (include city, state and zip code)

413 NW 3rd Ave Gainesville, FL 32601

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

Support issues ~~and~~ who share the vision of
a creative community

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

Community development

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

Bryan
Eastman

413 NW 3rd Ave
Gainesville, FL
32601

Community
collaborative
caucus
chair +
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
Bryan Eastman	413 NW 3rd Ave Gainesville, FL 32601	Community collaborative Caucus

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: issues of community interest

List Any Issues this Committee is Opposing: n/a

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 a non-profit organization

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

Name of Bank or Depository & Account Number	Mailing Address
wells Fargo 3420689972	1717 NW 13th St. Gainesville FL 32609

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
n/a			

STATE OF Florida Alachua COUNTY

I, Bryan Eastman, certify that the information in this Statement of

Organization is complete, true and correct.

X Bryan Eastman
Signature of Chairman of Political Committee

2/2/17
Date