

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

OFFICE USE ONLY

(PLEASE TYPE)

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1. Full Name of Committee

Represent Me

Telephone

352-
339-4670

Mailing Address (include city, state and zip code)

PO Box 1585 Newberry FL 32669

Street Address (include city, state and zip code)

26910 SW 30 Ave Newberry FL 32669

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A	N/A	N/A

3. Area, Scope and Jurisdiction of the Committee

Alachua County

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

Political / Government

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
Jordan Marlowe	P.O. Box 1585 Newberry FL 32669	Chair