STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

AMBRICE

2021 NOV -9 AM 9: 10

1. Full Name of Committee		Telephone			
Citizens Encouraging Pro	352-629-8051				
Mailing Address (include city 310 SE 3rd Street	y, sta	te and zip code)			
Ocala, FL 34471					
Street Address (include city,	state	and zip code)			
310 SE 3rd Street					
Ocala, FL 34471					
2. Affiliated or Connected Or committees)	gani	zations (includes other committees of cor	ntinuous ex	cistence and political	
Name of Affiliated or Connected Organization		Mailing Address	Relationship		
Ocala-Marion County Chamber of Commerce, li	nc.	310 SE 3rd Street Ocala, FL 34471		Affiliated Organization	
3. Area, Scope and Jurisdicti Countywide issues politica		f the Committee mmittee to advance a positive busine	ess climate	e	
4 Nature of Organization or	Orga	nization's Special Interest (e.g., medical, l	enal educ	ation etc.)	
Political	- . g	meanon o oposiai misorost (sigi, moaroai, i	oga., oaao	u, o,	
5. Identify by Name, Address	and	Position, the Custodian of Books and Ac	counts (ind	clude treasurer's name)	
Full Name	Mailing Address Cor			nmittee Title or Position	
Carolyn K. Roberts		SE 3rd Street ala, FL 34471	Treasure	er	

	and Position, Other Principal (ny (include chairman's name		officers a	nd Memi	bers of the				
Full Name	Mailing Add	ess Con		nmittee Title or Position					
Douglas P. Cone Navroz Saju Harvey Vandeven	310 SE 3rd Street Ocala, FL 34471	Chair Vice Chair Secretary							
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				
N/A			,						
8. List Any Issues this Committee is Supporting: Marion County One Percent (1%) Public Safety and									
List Any Issues this Committee is Opposing: Transportation Infrastructure Local Option Sales Tax To be determined									
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? Disposition of funds will be made to an IRS Code 501(c)(6) non-profit organization; other actions not prohibited by law.									
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds									
Name of Bank or Depor	Mailing Address								
Renasant Bank	1409 E Silver Springs Boulevard Ocala, FL 34470								
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	М	ailing Address				
Form 1120POL, Form 990, as may be required	March 15, annually March 15, annually	Internal Revenue Service	ice		Internal Revenue Service Center Ogden, UT 84201-0027				
STATE OF Florida	Marion COUNTY								
Douglas P. Cone , certify that the information in this Statement of Organization is complete, true and correct.									
X Signature of Chairman of Political Committee									