

RECEIVED

2005 JUN 23 PM 1:48

MIAMI-DADE
ELECTIONS

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR POLITICAL COMMITTEES
AND ELECTIONEERING COMMUNICATION
ORGANIZATIONS
(Sections 106.011(1) & 106.021(1), F.S.)
(PLEASE TYPE)

CHECK APPROPRIATE BOX:

☒ Original Appointment ☐ Deputy Treasurer ☐ Reappointment of Treasurer ☐ Secondary Depository

1. Committee or Electioneering Communication Organization Name <i>United Citizens of Old Cutler Bay, Inc.</i>		2. Mailing Address <i>9871 SW 221st Terrace Miami, FL 33190</i>		
Telephone (optional) <i>786-543-8735</i>	3. City <i>Miami</i>	4. County <i>Miami Dade</i>	5. State <i>FL.</i>	6. Zip Code <i>33190</i>

The following person has been appointed to serve as ☒ Campaign Treasurer ☐ Deputy Treasurer for the above named committee.

7. Name of Treasurer or Deputy Treasurer <i>Margaret Bell (Peggy)</i>		8. Street Address <i>9354 SW 212 Terrace Miami, FL 33189</i>	
9. City <i>Miami</i>	10. County <i>Miami Dade</i>	11. State <i>Florida</i>	12. Zip Code <i>33189</i>

I have designated the following named bank as my ☒ Primary Depository ☐ Secondary Depository

13. Bank Name (include account number) <i>Community Bank of Florida 4652918606</i>		14. Street Address <i>18765 S. Dixie Hwy</i>	
15. City <i>Miami</i>	16. County <i>Miami-Dade</i>	17. State <i>Florida</i>	18. Zip Code <i>33157</i>

19. Name of Chairman <i>Margaret Bell (Peggy)</i>	20. Signature of Chairman <i>X Margaret Bell</i>
--	---

Campaign Treasurer's Acceptance of Appointment

I, *Margaret Bell (Peggy)*, do hereby accept the appointment as
(Please Print or Type)

☒ Campaign Treasurer ☐ Deputy Treasurer for the *United Citizens of Old Cutler Bay, Inc.*

Committee or Organization. As a duly registered voter in *Miami-Dade* County, Florida, I am
qualified to accept this appointment.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.

6/23/05
Date

X Margaret Bell
Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE			OFFICE USE ONLY	
(PLEASE TYPE)			<div style="border: 1px solid black; padding: 2px; display: inline-block;">RECEIVED</div> 2005 JUN 23 PM 1:48 MIAMI-DADE ELECTIONS	
1. Full Name of Committee			Date	
United Citizens of Old Cutler Bay, Inc.			06/08/05	
Mailing Address (if post office box or drawer, please add street address)			Telephone	
9871 SW 221st terrace			(786) 543-8735	
City	County	State	Zip Code	
Miami	Miami-Dade	FL	33190	
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)				
Name of Affiliated or Connected Organization	Mailing Address		Relationship	
None	None		None	
3. Area, Scope and Jurisdiction of the Committee				
Newly incorporated municipality of Cutler Ridge Area				
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.)				
Supporting the charter and the name Town of Cutler Bay				
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	
Priyanshu A Adathakkar	9871 SW 221st terrace Miami, Fl. 33190		CO-Chair and Treasurer	
Margaret (Peggy) Bell	9354 SW 212 Terrace Miami, FL 33189		Treasurer and Co-chair	



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
Margaret (Peggy) Peggy Bell	9354 S.W. 212 Terrace Miami, Fl. 33189	Co-Chair

7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting

Full Name	Mailing Address	Office Sought	Party
n/a			

8. List Any Issues this Committee is Supporting: *Supporting the charter and the name "Town of Cutler Bay"*
List Any Issues this Committee is Opposing:

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?

donated to charity

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

Name of Bank or Depository & Account Number	Mailing Address
Community Bank of Florida	18765 So. Dixie Hwy Miami, Fl. 33157

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

Miami-Dade COUNTY

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

MIAMI-DADE
ELECTIONS

2005 JUN 23 PM 1:48

X

[Signature]
Signature of Chairman of Political Committee

RECEIVED