

ELECTIONEERING COMMUNICATION STATEMENT OF ORGANIZATION

(PLEASE TYPE)

OFFICE USE ONLY

1. Full Name of Organization Citizens for Truth in Government		Telephone 305-951-2176	
Mailing Address (include city, state and zip code) PO Box 6677681, Miami, FL 33166			
Street Address (include city, state and zip code) 6360 NW 114th Ave #224, Doral, FL 33178			
2. Affiliated or Connected Organizations			
Name of Affiliated or Connected Organization	Mailing Address	Relationship	
Not Applicable		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED 2012 OCT 15 PM 3:58 MIAMI DADE COUNTY ELECTIONS DEPARTMENT </div>	
3. Area, Scope and Jurisdiction of the Organization Miami-Dade County			
4. Identify by Name, Address & Position, the Custodian of Books & Accounts for the Organization			
Full Name	Mailing Address	Street Address	Title or Position
Maria Hills	PO Box 6677681 Miami, FL 33166	6360 NW 114th Ave, #224 Doral, FL 33178	Chairperson
5. This Organization was formed (check applicable box): (Calendar quarters end the last day of March, June, September, and December.)			
<input checked="" type="checkbox"/> As a newly created organization during the current calendar quarter. <input type="checkbox"/> From an organization existing prior to the current calendar quarter.			

6. List By Name, Mailing and Street Address, & Position, Other Principal Officers, including the treasurer and deputy treasurer, if any. Include the top-ranking officer's (e.g., chairperson) name and information.

Full Name	Mailing Address	Street Address	Title or Position
Ria Khan	PO Box 6677681 Miami, FL 33166	6332 NW 173rd Terrace Miami Lakes, FL 33015	Treasurer

7. In the Event of Dissolution, What Disposition will be Made of the Residual Funds?

Donation to a non-profit organization.

8. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications

Name of Bank or Depository	Mailing Address
Chase	10795 NW 58th Street Miami, FL 33178

9. List All Reports Required to be Filed by this Organization with Federal Officials, & the Names, Addresses, & Positions of Such Officials, If Any


Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
Not Applicable			

STATE OF Florida

Miami-Dade COUNTY

I, Maria Hills, certify that the information in this Statement of

Organization is complete, true, and correct.

X 
Signature of Top-ranking Principal Officer of Organization

10/15/12
Date

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

OFFICE USE ONLY

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name Maria Hills		Telephone 305-951-2176
Street Address 6360 NW 114th Ave, #224		
City Doral	State FL	Zip Code 33178
Mailing Address PO Box 6677681		
City Miami	State FL	Zip Code 33166

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

Signature of Registered Agent

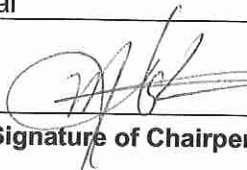
Date

Former Registered Agent and Office Information (for changes only)

Name		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization Citizens for Truth in Government		
Street Address 6360 NW 114th Ave, #224		Telephone 305-951-2176
City Doral	State FL	Zip Code 33178



Signature of Chairperson

MARIA HILLS

Printed Name of Chairperson

10/15/12

Date

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ELECTIONS DEPARTMENT



Access to Handbook and the Election Laws of the State of Florida

Candidate/Chairperson:

Maria

Hills

First Name

Middle Name

Last Name

Citizens for Truth in Government

Office Sought / Organization

I acknowledge that it is my responsibility to read, understand and follow the requirements described in the following resources available on the Miami-Dade County Elections Department Website:

- Candidate Qualifying Handbook (http://www.miamidade.gov/elections/candidate.asp)
Political Committee Handbook (http://www.miamidade.gov/elections/pacs.asp)

Acknowledged by: [Signature] Candidate / Chairperson Signature

Date: 10/15/12

Primary Telephone Number: 305-951-2176

Alternate Telephone Number:

E-mail address: MCHILLS@AOL.COM

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