

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE
ELECTIONS

1. Full Name of Committee

An Accountable Miami-Dade

Telephone

251-610-6081

Mailing Address (include city, state and zip code)

50 Biscayne Boulevard No. 803, Miami, FL 33132

Street Address (include city, state and zip code)

Same

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

3. Area, Scope and Jurisdiction of the Committee

Ballot referendum Miami-Dade County.

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

Campaign Finance

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

Ben H. Harris, III

50 Biscayne Boulevard No. 803
Miami, FL 33132

Treasurer

Tara Geise

4320 S. Thatcher Ave.
Tampa, FL 33611

Deputy 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
Patrick Hidalgo	2512 SW 113 Ct. Miami FL 33165	Chairperson

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: Campaign Finance referendum in Miami Dade County.
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?
 Return to contributors, or contribute to a 501(c)3 or 527 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	4203 W. Gandy Blvd. Tampa, FL 33611

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
990	annually	IRS	Ogden, UT

STATE OF Florida Miami-Dade COUNTY

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

X  Signature of Chairman of Political Committee

MAY 9, 2017 Date

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 ELECTIONS

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(1) and 106.021(1), F.S.)

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ELECTIONS**

CHECK APPROPRIATE BOX:

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Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization An Accountable Miami-Dade		2. Telephone (251) 610-6081	
3. Name of Treasurer or Deputy Treasurer Ben H. Harris, III		4. Email (optional) benharris112663@gmail.com	
5. Telephone (optional) ()			
6. Mailing Address 50 Biscayne Boulevard No. 803; Miami, FL 33132			
7. Street Address Same			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Wells Fargo		10. Street Address 4203 W. Gandy Blvd.	
11. City Tampa		12. State FL	13. Zip Code 33611
14. Signature of Chairman <input checked="" type="checkbox"/> 		15. Name of Chairman (Print or Type) Patrick Hidalgo	

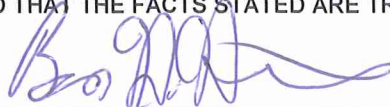
Campaign Treasurer's Acceptance of Appointment

I, Ben H. Harris, III, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for An Accountable Miami-Dade
(Committee or Organization)

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.

May 8, 2017

Date



Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
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(Sections 106.011(1) and 106.021(1), F.S.)

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MIAMI-DADE
ELECTIONS

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization An Accountable Miami-Dade		2. Telephone (251) 610-6081	
3. Name of Treasurer or Deputy Treasurer Tara Geise		4. Email (optional) tara@geise2strategies.com	
5. Telephone (optional) ()			
6. Mailing Address 4320 S. Thatcher Ave.; Tampa, FL 33611			
7. Street Address Same			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank Wells Fargo		10. Street Address 4203 W. Gandy Blvd.	
11. City Tampa		12. State FL	13. Zip Code 33611
14. Signature of Chairman X 		15. Name of Chairman (Print or Type) Patrick Hidalgo	

Campaign Treasurer's Acceptance of Appointment

I, Tara Geise, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for An Accountable Miami-Dade
(Committee or Organization)

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.

5-8-17

Date

X



Signature of Campaign Treasurer or Deputy Treasurer



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

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MIAMI-DADE ELECTIONS

Candidate/Chairperson:

Patrick

Hidalgo

First Name

Middle Name

Last Name

An Accountable Miami-Dade

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: May 9, 2017

Primary Telephone Number: 202.271.5316

Alternate Telephone Number:

E-mail address: patrickfhidalgo@gmail.com

**Campaign Treasurer's Report
Miami-Dade County Electronic Filing Requirements**



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: AN Accountable Miami Dade

Party Executive Committee: _____

Other: _____

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ELECTIONS

Patrick Hidalgo

I, _____
(Please print name of Candidate or Chairperson)

understand that Campaign Treasurer's Reports must be filed electronically via the Supervisor of Elections website by midnight of the day designated in order to comply with Miami-Dade County requirements. I also acknowledge that Sections 12-17 and 12-21 of the Code of Miami-Dade County regarding the filing of the campaign finance reports with the Supervisor of Elections were recently amended in that original signed hardcopies are no longer required.

I also understand that, in accordance with Section 12-14.1 of the Code of Miami-Dade County, Florida, candidates running for the Offices of Miami-Dade County Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council must now file the Absentee Ballot Campaign Report ([MD-ED 26](#)) to disclose the names of paid campaign workers engaged in absentee ballot activities.

Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County requires that candidates for Property Appraiser also fill out the Miami-Dade county Contributing Entity ([MD-ED 19](#)) form for every reporting period if contributions are received from a corporation incorporated under the laws of the State of Florida or any other state or any foreign country of any partnership or any other legal entity other than a natural person.

MAY 9, 2017

Signature of Candidate or Chairperson

Date

Day Time Telephone Number: 202.271.5316

Alternate Contact Number: _____

Email Address: patrickfhidalgo@gmail.com

This form must be filed with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository form is filed.