STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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Watching Execut	res Conduit	MIAMI-DADE			
1. Full Name of Committee	res Conduct L Br, Haleah, FL 33U	15 ELEGI	Telephone		
abeting Exce	utives Conduct		(754)217-0198		
Mailing Address (include city					
18820 Westwork	the Nor Malech, FL	33015			
Street Address (include city,	state and zip code)				
Same as above					
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)					
Name of Affiliated or Connected Organization	Mailing Addres	ss	Relationship		
	3				
	-				
,	,		1		
W/A	NIA		NIA		
3. Area, Scope and Jurisdicti	ion of the Committee				
State and Local Electrons - Miami. Dade County					
4. Nature of Organization or	Organization's Special Interest (e.g.,	medical, legal, educ	ation, etc.)		
Incorporating	Liberty Square	City Inter	alias		
	and Position, the Custodian of Book	s and Accounts (inc	clude treasurer's name)		
Full Name	Mailing Address		mittee Title or Position		
Allen Shart	Hialeaby Florida	Chair	man / Tresures		
	33015				

	and Position, Other Principal (Any (include chairman's name)		ficers and Memb	pers of the	
Full Name	Mailing Addr	ress Committee Title or Position		itle or Position	
Merika Merus Allan Stuart	miami, Flori La	1 HAVE	Secratary		
Allen Stuart	18820 Wentwor Thaleah, Florida	18820 Wentworth Br. Chairper		n/Tresurer	
	, Office Sought and Party Affiliang (if none, please indicate)		or Other Individ	dual that this	
Full Name	Mailing Address	Office S	Sought	Party	
NIA	WIA	NA		N/A	
8. List Any Issues this Co	ommittee is Supporting: Soc	in Economie	- Deve	elupment	
List Any Issues this Co				V	
9. If this Committee is Su	pporting the Entire Ticket of a l	Party, Give Name of	Party		
WIA				2016	
10. In the Event of Dissol	ution, What Disposition will be	Made of Residual Fu	ınds?	3 5 0	
	Return to	-ontributor			
11. List all Banks, Safety	Deposit Boxes, or Other Depos		nmittee Funds		
Name of Bank or Dep	11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds Name of Bank or Depository & Account Number Mailing Address				
Alla		NIA			
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 Ma	ailing Address	
NA	NIA	NIA	\sim	lA	
STATE OF Florid	a	Mian	,- Nade	COUNTY	
1, 1) llan	Shuart	, certify that the inf	ormation in this S	tatement of	
Organization is complete,	rue and correct.				
x ///	1	U	4-11-16		
Signature of	Chairman of Political Committee		Dat	e	

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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MIAMI-DADE FLECTIONS

Signature of Campaign Treasurer or Deputy Treasurer

CHECK APPROPRIATE BOX: OFFICE USE ONLY Original Appointment of Treasurer Reappointment of Treasurer **Deputy Treasurer** 1. Committee or Organization 2. Telephone (754) 217-0198 3. Name of Treasurer or Deputy Treasurer 5. Telephone (optional) (786)348-4869 Allan 6. Mailing Address 18820 Wentworth Dr, Higleah, FLUNIAA 7. Street Address 8. The following bank has been designated as the Primary Depository Secondary Depository 9. Name of Bank 10. Street Address 11. City 12. State Florida 15. Name of Chairman (Print or Type) Allan Campaign Treasurer's Acceptance of Appointment Stuart (Please Print or Type) , do hereby accept the appointment as treasurer or deputy treasurer for 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. X 4-12-16

REGISTERED AGENT STATEMENT OF APPOINTMENT

OFFICE USE ONLY

(Section 106.022, F.S.)		2016 MAY -3 PM 12: 45		
		MAMIDAGE		
Original Appointment Change of Appoin	tment	MIAMI-DADE ELECTIONS		
☐ Change of Mailing Address ☐ Change of Physica	al Address			
Registered Ag	ent and Office Info	rmation		
Name Allan Styart		Telephone (754) 217-0198		
Street Address 18820 Wentworth br				
City Thatech	State	Zip Code		
Mailing Address Same as above				
City	State	Zip Code		
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	Da			
Former Registered Agent a	nd Office Informati	on (for changes only)		
Name V14		Telephone		
Street Address		1		
City	State	Zip Code		
Committee or	Organization Infor	mation		
Name of Committee or Organization				
Watching Executives Conduct				
Street Address 1880 Wentworth Dr.		Telephone (254) 217-0198		
City	State	Zip Code		
Signature of Chairperson				
	Styart 0	11-12-16		
Printed Name of Chairperson	Da Da			



Access to Handbook and the Election Laws of the State of Florida MAY - 3 PM 12: 44

Candidate/Chairperson:		MIAMI-DAUL ELECTIONS
First Name	Middle Name	Stuart Last Name
Watching Executives (Last Name
I acknowledge that it is my requirements described in th County Elections Department N	/ responsibility to read, ne following resources a	understand and follow th vailable on the Miami-Dad
Florida, County Laws and H	ite Laws and Handbooks, the I	Election Laws of the State of tion. Electronic Reporting Dates
Fiorida, County Laws and H	ook (<u>http://www.miamidade.gov</u> te Laws and Handbooks, the I landbooks, Electronic Reportin nation, and Recent Legislative	Election Laws of the State of
Acknowledged by:	A	
Date: 04-12-16	Candidate / Chairperson S	ignature
Primary Telephone Number:	(754) 217-0198	
Alternate Telephone Number:	(786) 348-4869	
E-mail address: Mn Dassuca	Igmail com	

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



Candidate (office sought):	
Candidate's Florida Voter Registration Number:	2016
Political Committee: Watching Executives Conduct	AY -3
Party Executive Committee:	7
Other:	# 12:
I, Allan T. Stuart (Please print name of Candidate or Chairperson)	
understand that Campaign Treasurer's Reports <u>must</u> be filed electronical Supervisor of Elections website by midnight of the day designated in order with Miami-Dade County requirements. I also acknowledge that Sections 12-21 of the Code of Miami-Dade County regarding the filing of the campaig reports with the Supervisor of Elections were recently amended in that origin hardcopies are no longer required.	to comply 12-17 and an finance
I also understand that, in accordance with Section 12-14.1 of the Code of Mi County, Florida, candidates running for the Offices of Miami-Dade County, Florida, candidates running for the Offices of Miami-Dade County, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Communication must now file the Absentee Ballot Campaign Report (MD-ED 26) to disclose the of paid campaign workers engaged in absentee ballot activities.	ty Mayor, ty Council
Lastly, I understand that Section 2.69(e) of the Code of Miami-Dade County that candidates for Property Appraiser also fill out the Miami-Dade county Co Entity (MD-ED 19) form for every reporting period if contributions are receive corporation incorporated under the laws of the State of Florida or any other state foreign country of any partnership or any other legal entity other than a natural	entributing ed from a late or any
Signature of Condidate as Obsider	w
Signature of Candidate or Chairperson Date	
Day Time Telephone Number: (754) 217-0198	
Alternate Contact Number: (786) 348-4869	
Email Address: napassocwa mayl. com	