

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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MIAMI-DADE
ELECTIONS

1. Full Name of Committee

Good Government in Miami-Dade County

Telephone

305-593-2644

Mailing Address (include city, state and zip code)

1985 NW 88th Court, Suite 101, Doral, FL 33172

Street Address (include city, state and zip code)

1985 NW 88th Court, Suite 101, Doral, FL 33172

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

Miami-Dade County, Florida *Political Issues regarding Miami-Dade County.*

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

Political *and legislative issues of local concern*

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
Carlos M. Trueba	1985 NW 88th Court, Suite 101 Doral, FL 33172	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
Roland Sanchez-Medina	201 Alhambra Circle, Suite 1205 Coral Gables, FL 33134	Chairman

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
Raquel Regalado	1985 NW 88th Court Suite 101 Doral, FL 33172	Miami-Dade County Mayor	/

8. List Any Issues this Committee is Supporting: All county issues

List Any Issues this Committee is Opposing: None

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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?

Returned pro-rata to contributors or donate to a 501c3 charitable organization

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

Name of Bank or Depository & Account Number	Mailing Address
City National Bank	8725 NW 18th Terrace Miami, FL 33172

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

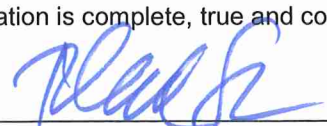
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
N/A			

STATE OF Florida COUNTY Miami-Dade

I, Roland Sanchez-Medina, certify that the information in this Statement of

Organization is complete, true and correct.

X



Signature of Chairman of Political Committee

8/9/16

Date

**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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CHECK APPROPRIATE BOX:

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Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization Good Government in Miami-Dade County	2. Telephone (305) 593-2644
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3. Name of Treasurer or Deputy Treasurer Carlos M. Trueba	4. Email (optional) cpazos@rtc-cpa.com	5. Telephone (optional) (305) 593-2644
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6. Mailing Address
1985 NW 88th Court, Suite 101, Doral, FL 33172

7. Street Address
1985 NW 88th Court, Suite 101, Doral, FL 33172

8. The following bank has been designated as the Primary Depository Secondary Depository

9. Name of Bank City National Bank	10. Street Address 8725 NW 18th Terrace
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11. City Miami	12. State Florida	13. Zip Code 33172
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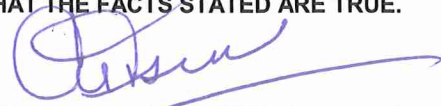
14. Signature of Chairman <input checked="" type="checkbox"/> 	15. Name of Chairman (Print or Type) Roland Sanchez-Medina
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Campaign Treasurer's Acceptance of Appointment

I, Carlos M. Trueba, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Good Government in Miami-Dade County
(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.**

8/09/16
Date


Signature of Campaign Treasurer or Deputy Treasurer

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

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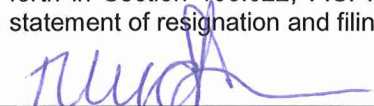
MIAMI-DADE
ELECTIONS

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

Registered Agent and Office Information

Name Registered Corporate Services, LLC		Telephone 305-593-2644
Street Address 201 Alhambra Circle, Suite 1205		
City Coral Gables	State Florida	Zip Code 33134
Mailing Address 201 Alhambra Circle, Suite 1205		
City Coral Gables	State Florida	Zip Code 33134

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

8/9/2016

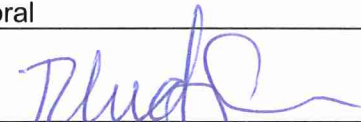
Date

Former Registered Agent and Office Information (for changes only)

Name N/A		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization Good Government in Miami-Dade County		
Street Address 1985 NW 88th Court, Suite 101		Telephone 305-593-2644
City Doral	State Florida	Zip Code 33172



Signature of Chairperson

Roland Sanchez-Medina

Printed Name of Chairperson

8/9/2016

Date



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

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Candidate/Chairperson:

Roland

Sanchez-Medina

First Name

Middle Name

Last Name

Good Government in Miami-Dade County

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: 8/9/16

Primary Telephone Number: 305-593-2644

Alternate Telephone Number: [Blank]

E-mail address: cpazos@rtc-cpa.com

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



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: Good Government in Miami-Dade County

Party Executive Committee: _____

Other: _____

I, Roland Sanchez-Meding
(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.

 8/9/16
Signature of Candidate or Chairperson Date

Day Time Telephone Number: 305-593-2644

Alternate Contact Number: _____

Email Address: cpazos@rtc-cpa.com

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