## STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

**OFFICE USE ONLY** 

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2017 NOV 16 AM II: 16

MIAMI-DADE

1. Full Name of Committee WE THE PEOPLE, PC			CLLOTTO	Telephone 305-593-2644					
Mailing Address (include city 1985 NW 88TH COURT DORAL, FL 33172									
Street Address (include city, 1985 NW 88TH COURT DORAL, FL 33172		* *							
2. Affiliated or Connected Or committees)	gani	zations (includes other committees of cor	ntinuous ex	istence and political					
Name of Affiliated or Connected Organization		Mailing Address		Relationship					
NONE		-							
3. Area, Scope and Jurisdiction of the Committee MIAMI-DADE COUNTY									
		nization's Special Interest (e.g., medical, I AL POLICY EDUCATION	egal, educ	ation, etc.)					
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	Т	REASURER					

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 Add	Mailing Address			Committee Title or Position							
JUAN C. PLANAS	SUITE 1715	600 BRICKELL AVENUE				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		P	arty						
NONE				SHOI	DADE							
8. List Any Issues this Committee is Supporting: NONE												
List Any Issues this Committee is Opposing: NONE												
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? RESIDUAL FUNDS WILL BE GIVEN TO CHARITABLE ORGANIZATIONS 501(C)3												
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds												
Name of Bank or Depo	Mailing Address											
DADE COUNTY FEDI	1500 NW 107TH AVENUE DORAL, 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	f Official	М	Mailing Address							
FORM 1120POL	MARCH 15,ANNUALLY	INTERNAL REV	ENUE	OGDE	OGDEN, UT 84201		1					
STATE OF FLORIDA	MIAMI-DADE COUNTY											
I, JUAN CARLOS PLANAS, ESQ , certify that the information in this Statement of												
Organization is complete, true and correct.												
X /////												
Signature of Chairman of Political Committee Date												