

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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2018 MAY 10 AM 10: 22

MIAMI-DADE
ELECTIONS

Telephone
305-445-0777

1. Full Name of Committee

OUR CHILDREN FIRST

Mailing Address (include city, state and zip code)
2600 SOUTH DOUGLAS ROAD, SUITE 900
CORAL GABLES, FL 33134

Street Address (include city, state and zip code)
2600 SOUTH DOUGLAS ROAD, SUITE 900
CORAL GABLES, FL 33134

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

PC TO SUPPORT OR OPPOSE BALLOT ISSUES/CANDIDATES IN MIAMI-DADE COUNTY.

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

POLITICAL, GOVERNMENT. IMPROVE KIDS' QUALITY OF LIFE WITH EDUCATION.

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
JOSE A. RIESCO, CPA	2600 South Douglas Road, Suite 900 Coral Gables, FL 33134	Treasurer/Custodian of records
JEANNINE R MIRANDA	2600 South Douglas Road, Suite 900 Coral Gables, FL 33134	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
Alina Van Katwyk	6957 Willow Lane Miami Lakes, FL 33014	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
Perla Tabares Hantman	2600 South Douglas Road, Suite 900 Coral Gables, FL 33134	Miami-Dade County, School Board, District #4	Non-Partisan

8. List Any Issues this Committee is Supporting: To be determined
List Any Issues this Committee is Opposing: To be determined

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?
 CONTRIBUTE TO PCs, ECOs, 501(c)(3)s, AND OTHER ACTIVITIES ALLOWED BY LAW.

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

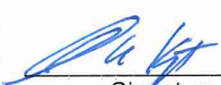
Name of Bank or Depository & Account Number	Mailing Address
REGIONS BANK	3516 MAIN HIGHWAY MIAMI, FL 33133

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
FORM SS4 FORM 8871 FORM 1120POL FORM 990	UPON FORMATION UPON FORMATION ANNUALLY, MARCH 15 ANNUALLY, MAY 15	INTERNAL REVENUE SERVICE INTERNAL REVENUE SERVICE INTERNAL REVENUE SERVICE INTERNAL REVENUE SERVICE	OGDEN, UT 84201 OGDEN, UT 84201 OGDEN, UT 84201 OGDEN, UT 84201

STATE OF FLORIDA MIAMI-DADE COUNTY

I, ALINA VAN KATWYK, certify that the information in this Statement of Organization is complete, true and correct.

X  _____ Date 5/9/18

Signature of Chairman of Political Committee

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 MIAMI-DADE
 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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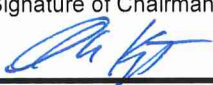
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MIAMI-DADE
ELECTIONS

CHECK APPROPRIATE BOX:

OFFICE USE ONLY

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

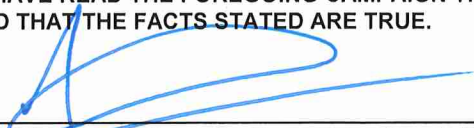
1. Committee or Organization OUR CHILDREN FIRST		2. Telephone (305) 445-0777	
3. Name of Treasurer or Deputy Treasurer JOSE A. RIESCO, CPA		4. Email (optional) jose@riescoandcompany.com	
5. Telephone (optional) (305) 445-0777			
6. Mailing Address 2600 SOUTH DOUGLAS ROAD, SUITE 900, CORAL GABLES, FL 33134			
7. Street Address 2600 SOUTH DOUGLAS ROAD, SUITE 900, CORAL GABLES, FL 33134			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank REGIONS BANK		10. Street Address 3516 MAIN HIGHWAY	
11. City MIAMI		12. State FL	13. Zip Code 33133
14. Signature of Chairman X 		15. Name of Chairman (Print or Type) ALINA VAN KATWYK	

Campaign Treasurer's Acceptance of Appointment

I, JOSE A. RIESCO, CPA, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for OUR CHILDREN FIRST
(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.**

5/9/2018
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer


**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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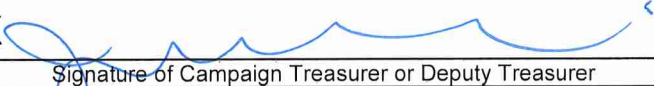
1. Committee or Organization OUR CHILDREN FIRST		2. Telephone (305) 445-0777	
3. Name of Treasurer or Deputy Treasurer JEANNINE R MIRANDA		4. Email (optional) jen@riescoandcompany.com	
5. Telephone (optional) (305) 445-0777			
6. Mailing Address 2600 SOUTH DOUGLAS ROAD, SUITE 900, CORAL GABLES, FL 33134			
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9. Name of Bank REGIONS BANK		10. Street Address 3516 MAIN HIGHWAY	
11. City MIAMI		12. State FL	13. Zip Code 33133
14. Signature of Chairman <input checked="" type="checkbox"/> 		15. Name of Chairman (Print or Type) ALINA VAN KATWYK	

Campaign Treasurer's Acceptance of Appointment

I, JEANNINE R MIRANDA, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for OUR CHILDREN FIRST
(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.

5/9/18
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: JOSE A. RIESCO, CPA Telephone: 305-445-0777

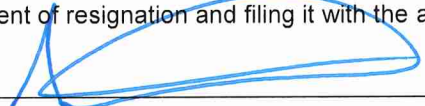
Street Address: 2600 SOUTH DOUGLAS ROAD, SUITE 900

City: CORAL GABLES State: FL Zip Code: 33134

Mailing Address: 2600 SOUTH DOUGLAS ROAD, SUITE 900

City: CORAL GABLES State: FL 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.

 _____ Date: 5/9/2018

Signature of Registered Agent

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: OUR CHILDREN FIRST

Street Address: 2600 SOUTH DOUGLAS ROAD, SUITE 900 Telephone: 305-445-0777

City: CORAL GABLES State: FL Zip Code: 33134

 _____
Signature of Chairperson

ALINA VAN KATWYK
Printed Name of Chairperson

Date: 5/9/18



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

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MIAMI-DADE ELECTIONS

Candidate/Chairperson:

ALINA

VAN

KATWYK

First Name

Middle Name

Last Name

OUR CHILDREN FIRST

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: 5/9/18

Primary Telephone Number: 305-445-0777

Alternate Telephone Number: 305-216-4217

E-mail address: jose@riescoandcompany.com

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



Candidate (office sought): _____
Candidate's Florida Voter Registration Number: _____

Political Committee: OUR CHILDREN FIRST

Party Executive Committee: _____

Other: _____

I, ALINA VAN KATWYK

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(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 Vote by Mail Campaign Report (MD-ED 26) to disclose the names of paid campaign workers engaged in vote by mail ballot activities, if applicable.

Additionally, I understand that, in accordance with Sections 12-14.2 and 12-14.2.1 of the Code of Miami-Dade County, Florida, Miami-Dade County Elected Officers and 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 Reporting of Solicitation of Contributions for Political Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Political Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Political Committees, Electioneering Communications Organizations, Political Parties, and/or 501(c)4 organizations, if applicable.

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, if applicable.


Signature of Candidate or Chairperson

5/9/18
Date

Day Time Telephone Number: 305-445-0777

Alternate Contact Number: 305-216-4217

Email Address: jose@riescoandcompany.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.