

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY  
RECEIVED

2010 JUL 23 PM 12:46

MIAMI-DADE  
ELECTIONS

## 1. Full Name of Committee

Sweetwater Residents for Honest Government

Telephone

305-305-4345

Mailing Address (include city, state and zip code)

10949 SW 3rd Street, Sweetwater, FL 33174

Street Address (include city, state and zip code)

10949 SW 3rd Street, Sweetwater, FL 33174

## 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

Sweetwater, Miami-Dade County

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

Education of Electorate & Best Government Practices

## 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

Yoel Alfonso

11231 NW 20th Street  
Unit 140 #192  
Miami, 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 |
|--------------|--|-----------------------------|
| Yoel Alfonso | 11231 NW 20th Street<br>Unit 140 #192<br>Miami, FL 33172 | Chairman                    |
| Yoel Alsonso |  | Treasurer                   |

**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:** 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**

None

**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 Depository & Account Number | Mailing Address                      |
|---|--------------------------------------|
| TD Bank                                     | 10603 12th Street<br>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 Official | Mailing Address |
|--------------|----------------------------|-----------------------------|-----------------|
| Form 1120POL | March 15<br>Annually       | Internal Revenue            | Ogden, UT 84201 |

STATE OF Florida Miami-Dade COUNTY

I, Yoel Alfonso, certify that the information in this Statement of

Organization is complete, true and correct.

**X**

  
Signature of Chairman of Political Committee

7/23/18  
Date

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

RECEIVED

2018 JUL 23 PM 12:46

MIAMI-DADE  
ELECTIONS

CHECK APPROPRIATE BOX:

OFFICE USE ONLY



Original Appointment of Treasurer



Reappointment of Treasurer



Deputy Treasurer

1. Committee or Organization

Sweetwater Residents for Honest Government

2. Telephone

(305 ) 305-4345

3. Name of Treasurer or Deputy Treasurer

Yoel Alfonso

4. Email (optional)

cpazos@rtc-cpa.com

5. Telephone (optional)

(305 ) 305-4345

6. Mailing Address

10949 SW 3rd Street, Sweetwater, FL 33174

7. Street Address

10949 SW 3rd Street, Sweetwater, FL 33174

8. The following bank has been designated as the



Primary Depository



Secondary Depository

9. Name of Bank

TD Bank

10. Street Address

10603 NW 12th Street

11. City

Doral

12. State

Florida

13. Zip Code

33172

14. Signature of Chairman

X

15. Name of Chairman (Print or Type)

Yoel Alfonso

**Campaign Treasurer's Acceptance of Appointment**

I, Yoel Alfonso, do hereby accept the appointment as  
(Please Print or Type)

treasurer or deputy treasurer for Sweetwater Residents for Honest Government  
(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.**

7/23/18  
Date

X

[Signature]  
Signature of Campaign Treasurer or Deputy Treasurer

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

RECEIVED  
OFFICE USE ONLY  
2018 JUL 23 PM 12:46  
MIAMI-DADE  
ELECTIONS

☒ Original Appointment ☐ Change of Appointment  
☐ Change of Mailing Address ☐ Change of Physical Address

**Registered Agent and Office Information**

Name  
Yoel Alfonso Telephone  
305-305-4345

Street Address  
11231 NW 20th Street

City State Zip Code  
Miami Florida 33172

Mailing Address  
11231 NW 20th Street

City State Zip Code  
Miami Florida 33172

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

Date

7/23/18

**Former Registered Agent and Office Information (for changes only)**

Name Telephone  
N/A

Street Address

City State Zip Code

**Committee or Organization Information**

Name of Committee or Organization  
Sweetwater Residents for Honest Government

Street Address Telephone  
10949 SW 3rd Street 305-305-4345

City State Zip Code  
Sweetwater Florida 33174

Signature of Chairperson

Yoel Alfonso

Printed Name of Chairperson

Date

7/23/18

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



☐ Candidate (office sought): \_\_\_\_\_

Candidate's Florida Voter Registration Number: \_\_\_\_\_

☒ Political Committee: Sweetwater Residents For Honest Government

☐ Party Executive Committee: \_\_\_\_\_

☐ Other: \_\_\_\_\_

I, \_\_\_\_\_ Yoel Alfonso

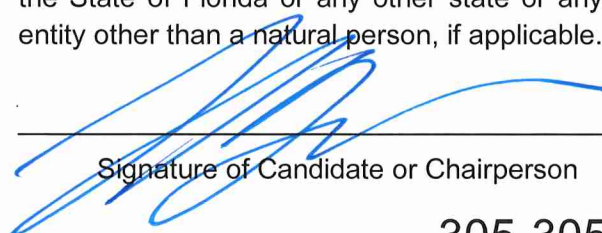
*(Please print name of Candidate or Chairperson)*

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

7/23/19  
\_\_\_\_\_  
Date

Day Time Telephone Number: 305-305-4345

Alternate Contact Number: 786-246-3390

Email Address: cpazos@rtc-cpa.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.*