

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**1. Full Name of Committee**

Telephone

True the Vote Miami

305 300 7237

Mailing Address (include city, state and zip code)

1925 Brickell Ave #D1605 Miami, FL 33129

Street Address (include city, state and zip code)

1925 Brickell Ave #D1605 Miami, FL 33129

**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, Supporting candidates

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

Legal

**5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)**

Full Name

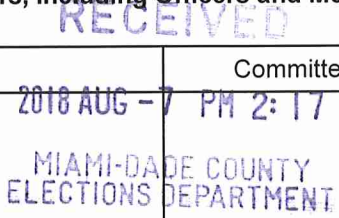
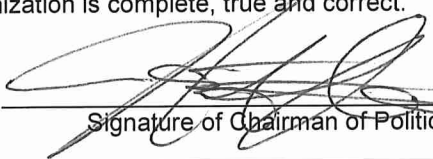
Mailing Address

Committee Title or Position

HECTOR ROOS

1925 Brickell Ave  
#D1605  
Miami, FL 33129

Chair  
Treasurer

<b>6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)</b>			
Full Name	Mailing Address	Committee Title or Position	
N/A		<div style="text-align: center;">  </div>	
<b>7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that this Committee is Supporting (if none, please indicate)</b>			
Full Name	Mailing Address	Office Sought	Party
Rick Scott	3150 Gordon Drive Naples, FL 34102	US Senate	REP
<b>8. List Any Issues this Committee is Supporting:</b> N/A <b>List Any Issues this Committee is Opposing:</b>			
<b>9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party</b>			
Republican			
<b>10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?</b>			
501c3 (Charity)			
<b>11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds</b>			
Name of Bank or Depository & Account Number		Mailing Address	
TD Bank		255 Alhambra Circle Coral Gables, FL 33134	
<b>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</b>			
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
N/A			
STATE OF <u>Florida</u> <u>Miami-Dade</u> COUNTY I, <u>Hector Roos</u> , certify that the information in this Statement of Organization is complete, true and correct. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <b>X</b>   Signature of Chairman of Political Committee </div> <div style="text-align: center;"> <u>8/7/18</u>  Date </div> </div>			

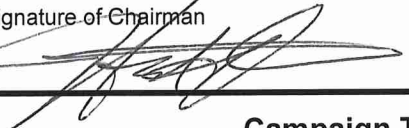
**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR  
POLITICAL COMMITTEES**  
(Sections 106.011(1) and 106.021(1), F.S.)

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ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

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☒ Original Appointment of Treasurer ☐ Reappointment of Treasurer ☐ Deputy Treasurer

1. Committee or Organization True the Vote Miami		2. Telephone (305) 300-7237	
3. Name of Treasurer or Deputy Treasurer Hector Roos		4. Email (optional) n/a	
5. Telephone (optional) n/a			
6. Mailing Address 1925 Brickell Ave #D1605 Miami, FL 33129			
7. Street Address 1925 Brickell Ave #D1605 Miami, FL 33129			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank TD Bank		10. Street Address 255 Alhambra Circle	
11. City Coral Gables		12. State FL	13. Zip Code 33134
14. Signature of Chairman 		15. Name of Chairman (Print or Type) Hector Roos	

**Campaign Treasurer's Acceptance of Appointment**

I, Hector Roos, do hereby accept the appointment as  
(Please Print or Type)  
treasurer or deputy treasurer for True the Vote Miami  
(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.

8/7/18  
Date

  
Signature of Campaign Treasurer or Deputy Treasurer



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

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

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

**Registered Agent and Office Information**

Name	Hector Roos	Telephone	305-300-7237
Street Address	1925 Brickell Ave #D1605		
City	Miami	State	FL
		Zip Code	33129
Mailing Address	1925 Brickell Ave #D1605		
City	Miami	State	FL
		Zip Code	33129

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


8/7/18  
Date

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

Name	Telephone	
Street Address		
City	State	Zip Code

**Committee or Organization Information**

Name of Committee or Organization	True the Vote Miami	
Street Address	1925 Brickell Ave #D1605	Telephone 305-300-7237
City	Miami	State FL
		Zip Code 33129

  
Signature of Chairperson

Hector Roos  
Printed Name of Chairperson

8/7/18  
Date



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

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

Candidate/Chairperson:

Hector

First Name

Christopher

Middle Name

Ross

Last Name

True the Vote Miami

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>)

Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Qualifying Information, Electronic Reporting Dates and Procedures, Important Candidate Information, and Recent Legislative Changes.

☒ Political Committee Handbook (<http://www.miamidade.gov/elections/pacs.asp>)

Contains information on State Laws and Handbooks, the Election Laws of the State of Florida, County Laws and Handbooks, Electronic Reporting Dates and Procedures, Important Committee Information, and Recent Legislative Changes.

Acknowledged by: \_\_\_\_\_

Candidate / Chairperson Signature

Date: \_\_\_\_\_

8/7/18

Primary Telephone Number: \_\_\_\_\_

305 - 300 - 7237

Alternate Telephone Number: \_\_\_\_\_

n/a

E-mail address: \_\_\_\_\_

Hector Ross@gmail.com

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



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

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

☒ Political Committee: True the Vote Miami

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

☐ Other: \_\_\_\_\_

I, Hector Roos

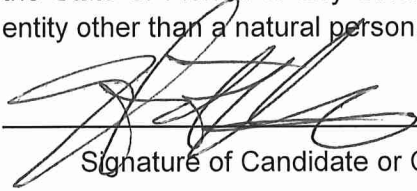
*(Please print name of Candidate or Chairperson)*

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

8/7/18  
\_\_\_\_\_  
Date

Day Time Telephone Number: 305-300-7237

Alternate Contact Number: n/a

Email Address: Hector Roos@gmail.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.*