

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

RECEIVED

2019 JUN 17 AM 9:36

MIAMI-DADE  
ELECTIONS

**1. Full Name of Committee**

PUTTING PEOPLE FIRST PC

Telephone

305-529-5440

Mailing Address (include city, state and zip code)

2600 DOUGLAS ROAD, SUITE 800, CORAL GABLES, FL 33134

Street Address (include city, state and zip code)

2600 DOUGLAS ROAD, SUITE 800, 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

NONE

**3. Area, Scope and Jurisdiction of the Committee**

MIAMI-DADE COUNTY

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

CIVIC AND GOVERNMENTAL POLICY 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

CARLOS M. TRUEBA

2600 DOUGLAS ROAD, SUITE 800  
CORAL GABLES, FL 33134

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
JOHN EGUSQUIZA	9960 SW 40TH STREET MIAMI, FL 33165	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
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**

N/A

**10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?**

RESIDUAL FUNDS WHILL 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
OCEAN BANK	780 NW 42ND AVENUE MIAMI, FL 33126

**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 1120PL	ANNUALY	INTERNAL REVENUE SERVICE	OGDEN, UT 84201

STATE OF FLORIDA

MIAMI-DADE

COUNTY

I, JOHN EGUSQUIZA, certify that the information in this Statement of

Organization is complete, true and correct.

**X**

Signature of Chairman of Political Committee

6/14/19

Date