## STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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2020 FEB 24 PM 4: 05

MIAMI-DADE

1. Full Name of Commi
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**Protect Our Future** 

Telephone

850-980-6542

Mailing Address (include city, state and zip code)

999 Ponce De Leon Boulevard

Suite 625

Coral Gables, FL 33134

Street Address (include city, state and zip code)

999 Ponce De Leon Boulevard

Suite 625

Coral Gables, FL 33134

### 2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)

Mailing Address	Relationship
N/A	N/A

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

Miami-Dade County to support or oppose candidates for County and Municipal office and other activities allowed under Florida Election

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

Political

#### 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
Stewart L. Appelrouth	999 Ponce De Leon Boulevard Suite 625 Coral Gables, FL 33134	Treasurer
Joshua Rador	999 Ponce De Leon Boulevard Suite 625 Coral Gables, FL 33134	Deputy Treasurer

8. List Any Issues this Committee is Supporting: N/A  List Any Issues this Committee is Opposing: N/A  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? Return of Contributions or donate to 501(c)(3) organization  11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds Name of Bank or Depository & Account Number  Name of Bank or Depository & Account Number  Ocean Bank  780 N.W. 42nd Ave. Miami, Florida 33126  12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addrand Positions of Such Officials, If Any  Report Title  Dates Required to be Filed Name & Position of Official  Mailing Address  Ogden, UT 84201	Full Name	(include chairman's name)  Mailing Address  Committee			mmittee Title or	mittee Title or Position	
7. List by Name, Address, Office Sought and Party Affiliation Each Candidate or Other Individual that the Committee is Supporting (if none, please Indicate)  Full Name  Mailing Address  Office Sought  Pa  TBD  8. List Any Issues this Committee is Supporting: N/A  List Any Issues this Committee is Opposing: N/A  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? Return of Contributions or donate to 501(c)(3) organization  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 N.W. 42nd Ave. Miami, Florida 33126  12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addrand Positions of Such Officials, If Any  Report Title  Dates Required to be Filed Name & Position of Official  Mailing Addr  SS4 Form 8871 Form 8871 Form 8871 Form 8871 Form 990  March 15, Annually May 15, Annually May 15, Annually May 15, Annually  STATE OF  Florida  Miami-Dade  Ocean Mailing Addr  Ocean Mailing Addr  Ocean Mailing Addr  Ocean Mailing Addr  Ogden, UT 84201 Ogden, UT 84201 Ogden, UT 84201 Ogden, UT 84201		Coral Gables, FL 33134 8325 SW 118 Terrace	ılevard, Suite 625 Chairperson				
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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? Return of Contributions or donate to 501(c)(3) organization  11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds Name of Bank or Depository & Account Number  Name of Bank or Depository & Account Number  Name of Bank  780 N.W. 42nd Ave. Miami, Florida 33126  12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addrand Positions of Such Officials, If Any  Report Title  Dates Required to be Filed  Name & Position of Official  Mailing Address  Name & Position of Official  Internal Revenue Service	)						
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11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds  Name of Bank or Depository & Account Number  Name of Bank or Depository & Account Number  Name of Bank  Name of Such Official  Name of Bank  Name of Bank  Name of Bank  Name of Such Official  Name of Bank  Name of Such Official  Name of Such Official  Name of Such Official  Name of Such Official  Name o					問蓋	124	
Name of Bank or Depository & Account Number  Naming Address  Name of Bank or Depository & Account Number  Naming Address  Name of Bank or Depository & Account Number  Naming Address  Name of Bank or Depository & Account Number  Naming Address  Name of Bank or Depository & Account Number  Naming Address  Name of Bank or Depositor Committee Funds  Naming Address  Name of Bank or Depositor Committee Funds  Naming Address  Name of Bank or Committee With Federal Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Bank or Committee With Federal Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names, Address  Name of Position of Officials and the Names of Offici				unds?	SHOL		
Ocean Bank  780 N.W. 42nd Ave. Miami, Florida 33126  12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Address and Positions of Such Officials, If Any  Report Title  Dates Required to be Filed  Name & Position of Official  Mailing Address SS4  Form 8871  Form 1120 POL  Form 1120 POL  Form 990  March 15, Annually  May 15, Annually  May 15, Annually  STATE OF  Florida  Table Committee with Federal Officials and the Names, Address and Position of Official Mailing Address and The Names, Address and Position of Official Mailing Address and Position of Off	List all Banks, Safety D	eposit Boxes, or Other Depos	sitories Used for Co	mmittee	Funds	0,	
Miami, Florida 33126  12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Address and Positions of Such Officials, If Any  Report Title  Dates Required to be Filed  Name & Position of Official  Mailing Address Addres	Name of Bank or Depos	sitory & Account Number		Mailing	Address		
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SS4 Form 8871 Form 1120 POL Form 990  STATE OF  SSA  The property of the prope			Miami, Florida 3	3126			
Form 8871 Form 1120 POL Form 990  STATE OF  Form Stowart Apploreuth  Upon Formation March 15, Annually May 15, Annually May 15, Annually  Internal Revenue Service Ogden, UT 84201					d the Names, <i>i</i>	Addresses	
Stowart Apploranth	and Positions of Such	Officials, If Any	tee with Federal Off	icials and			
Stowart Apploranth	and Positions of Such ( Report Title  n 8871 n 1120 POL	Dates Required to be Filed Upon Formation Upon Formation March 15, Annually	Name & Position o Internal Revenue Soluternal Reven	f Official ervice ervice ervice	Mailing Ogden, UT 84 Ogden, UT 84 Ogden, UT 84	Address 201 201 201	
	and Positions of Such ( Report Title  n 8871 n 1120 POL n 990	Dates Required to be Filed Upon Formation Upon Formation March 15, Annually	Name & Position o Internal Revenue So	f Official ervice ervice ervice ervice ervice	Mailing Ogden, UT 84 Ogden, UT 84 Ogden, UT 84 Ogden, UT 84	Address 201 201 201	
Organization is complete, true and correct.	Report Title  n 8871 n 1120 POL n 990  TATE OF Florida	Dates Required to be Filed  Upon Formation Upon Formation March 15, Annually May 15, Annually	Name & Position of Internal Revenue So Interna	f Official ervice ervice ervice ervice i-Dad	Mailing Ogden, UT 84 Ogden, UT 84 Ogden, UT 84 Ogden, UT 84	Address 201 201 201 201 201 COUNTY	
X Stewart L. Appelrouth 02-21-2020	Report Title  n 8871 n 1120 POL n 990  TATE OF Florida  Stewart Appler	Dates Required to be Filed Upon Formation Upon Formation March 15, Annually May 15, Annually	Name & Position of Internal Revenue So Interna	f Official ervice ervice ervice ervice i-Dad	Mailing Ogden, UT 84 Ogden, UT 84 Ogden, UT 84 Ogden, UT 84	Address 201 201 201 201 201 COUNTY	

#### APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR**

**POLITICAL COMMITTEES** 

(Sections 106.011(2) and 106.021(1), F.S.)

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MIAINI-DADE ELECTIONS

CHECK APPROPRIATE BOX:				
Initial Filing for: Primary Treasurer			OFFICE USE ONLY	
Re-filing to Change: Primary Treasurer Deputy Treasurer	✓ Primary/Seconda	any Donositony		
Re-filing to Change: Primary Treasurer Deputy Treasurer	V Primary/Seconda	ry Depository		
1. Committee		2. Telephone		
Protect Our Future		(305 ) 444-0999		
3. Name of Treasurer or Deputy Treasurer 4. Email (optional) 5. Telephone (optional)				
Joshua A. Rader josh@appelrout	th.com	om (305 ) 444-0999		
6. Mailing Address				
999 Ponce De Leon Boulevard, Suite 625, Coral C	Sables, FL 331	34		
7. Street Address				
999 Ponce De Leon Boulevard, Suite 625, Coral Ga	ables, FL 3313	4		
8. The following bank has been designated as the Prin	nary Depository	Seconda	ry Depository	
9. Name of Bank	10. Street Address	S		
Ocean Bank	an Bank 780 N.W. 42nd Ave.			
11. City	12. Sta	12. State 13. Zip Code		
Miami	Florida 33126		33126	
14. Signature of Chairman	15. Name of Chairman (Print or Type)			
XX	Stewart L. Ap	Stewart L. Applerouth		
Campaign Treasurer's Acceptance of Appointment				
Joshua Rader		, do hereb	y accept the appointment as	
(Please Print or Type)			\$	
treasurer or deputy treasurer for Protect Our Future				
	(Committe	ee)		
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.				
02-21-2020 x	Sh			
Date	Signature of Camp	aign Treasurer or	Deputy Treasurer	

#### APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR**

**POLITICAL COMMITTEES** 

(Sections 106.011(2) and 106.021(1), F.S.)

RECEIVED

2020 FEB 24 PM 4: 05

CHECK APPROPRIATE	BOX:					
Initial Filing for:	Primary Treasurer Depu	uty Treasurer				OFFICE USE ONLY
			<u> </u>			OTTIOL OCC ONLI
Re-filing to Change: ✓ I	Primary Treasurer Dep	uty Treasurer	✓ Primary/	/Secondar	y Depository	
1. Committee					2. Telephone	
Protect Our Future	ct Our Future (305 ) 444-0999			0999		
3. Name of Treasurer or Deputy Treasurer 4. Email (optional) 5. Telephone (optional)				ptional)		
Stewart L. Ap	pelrouth stew	/art@appelro	outh.con	n.com (305 ) 444-0999		
6. Mailing Address						
999 Ponce De Leo	n Boulevard, Suite 6	625, Coral G	Sables, F	L 3313	34	
7. Street Address						
999 Ponce De Leor	n Boulevard, Suite 6	25, Coral Ga	ables, FL	. 33134		
8. The following bank ha	s been designated as the	<b>✓</b> Prim	ary Depos	sitory	Seconda	ry Depository
9. Name of Bank			10. Street	Address		
Ocean Bank	ank 780 N.W. 42nd Ave.					
11. City				12. State 13. Zip Code		13. Zip Code
Miami			Florida 33126		33126	
14. Signature of Chairman	4. Signature of Chairman (Print or Type)			e)		
X×			Stewart L. Applerouth			
Campaign Treasurer's Acceptance of Appointment						
, Stewart A	pplerouth				المسموا ما	
1	(Please Print or	Type)			, do nereb	y accept the appointment as
treasurer or deputy treasurer for Protect Our Future						
	-		/ (0	Committee	)	
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.						
02-21-202	20	Х	/	X		
	Date	_	Signature o	of Campa	jgn Treasurer or I	Deputy Treasurer

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



Candidate (office sought):
Candidate's Florida Voter Registration Number:  Political Committee:  Protect Our Future
Party Executive Committee:
Other:
1. Stewat Applewash
(Please print name of Candidate or Chairperson)
understand that Campaign Treasurer's Reports <u>must</u> 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 Mai 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 Politica Committees, Electioneering Communications Organizations, 501(c)(4) Organizations and Politica Parties (MD-ED 28) to publicly disclose when they commence solicitation activities for Politica 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 Date
Day Time Telephone Number: 305 - 4 4 4 - 0999
Alternate Contact Number: 850 - 980 - 65 42
Alternate Contact Number: 850 - 980 - 65 1/2  Email Address: Stevart @ apple coush - Con

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.