

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

OFFICE USE ONLY

RECEIVED

2019 OCT -3 PM 4:31

MIAMI-DADE
ELECTIONS

Telephone

786-284-5387

1. Full Name of Committee

We The People of Miami

Mailing Address (include city, state and zip code)

P.O. Box 331274, Miami, FL 33233

Street Address (include city, state and zip code)

P.O. Box 331 274, Miami, FL 33233

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
NA		

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.)

SUPPORT GOOD GOVERNMENT

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	P.O. Box 331274, Miami, FL 33233	Chair / 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
Hector Roos	P.O. Box 331274 Miami, FL 33233	Chair

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
NA			

8. List Any Issues this Committee is Supporting: NA
List Any Issues this Committee is Opposing:

9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party
 NA

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?
 501c3

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	1208 SW 8th St Miami, FL 33135

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
NA			

STATE OF Florida COUNTY Miami-Dade

I, Hector Roos, certify that the information in this Statement of Organization is complete, true and correct.

X [Signature] Signature of Chairman of Political Committee 10/3/19 Date

RECEIVED
 2019 OCT -3 PM 4:31
 MIAMI-DADE
 ELECTIONS

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR
POLITICAL COMMITTEES**
(Sections 106.011(2) and 106.021(1), F.S.)

RECEIVED

2019 OCT -3 PM 4:31


MIAMI-DADE
ELECTIONS

CHECK APPROPRIATE BOX:

Initial Filing for: Primary Treasurer Deputy Treasurer

Re-filing to Change: Primary Treasurer Deputy Treasurer Primary/Secondary Depository

OFFICE USE ONLY


1. Committee <u>We The People of Miami</u>		2. Telephone <u>(786) 284-5387</u>	
3. Name of Treasurer or Deputy Treasurer <u>HECTOR ROOS</u>		4. Email (optional) <u>WeThePeopleofMiami@gmail.com</u>	
5. Telephone (optional) ()			
6. Mailing Address <u>P.O. Box 331274 Miami, FL 33233</u>			
7. Street Address <u>Same as above</u>			
8. The following bank has been designated as the <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository			
9. Name of Bank <u>TD Bank</u>		10. Street Address <u>1208 SW 8th St, Miami, FL 33135</u>	
11. City <u>Miami</u>		12. State <u>FL</u>	13. Zip Code <u>33135</u>
14. Signature of Chairman <u>X</u> 		15. Name of Chairman (Print or Type) <u>HECTOR ROOS</u>	

Campaign Treasurer's Acceptance of Appointment

I, HECTOR ROOS, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for We The People of Miami
(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.

10/3/19
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

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

OFFICE USE ONLY
RECEIVED

2019 OCT -3 PM 4:31

MIAMI-DADE
ELECTIONS

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

Registered Agent and Office Information

Name HECTOR ROOS Telephone 786-284-5387

Street Address P.O. Box 331274

City Miami State FL Zip Code 33233

Mailing Address same as above

City _____ State _____ Zip Code _____

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

10/3/19
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 We The People of Miami

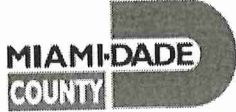
Street Address P.O. Box 331274 Telephone 786-284-5387

City Miami State FL Zip Code 33233


Signature of Chairperson

HECTOR ROOS
Printed Name of Chairperson

10/3/19
Date



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

2019 OCT -3 PM 4:31

Candidate/Chairperson:

MIAMI-DADE
ELECTIONS

Hector

Roos

First Name

Middle Name

Last Name

We The People of 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: _____

10/3/19

Primary Telephone Number: _____

786-284-5387

Alternate Telephone Number: _____

E-mail address: _____

We The People of Miami@gmail.com

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



Candidate (office sought): _____
Candidate's Florida Voter Registration Number: _____
 Political Committee: We The People of Miami
 Party Executive Committee: _____
 Other: _____
I, Hector Roas

(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

10/3/19

Date

Day Time Telephone Number: 786-284-5387

Alternate Contact Number: _____

Email Address: We The People of Miami@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.