

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

1. Full Name of Committee
Maverick PAC

Telephone
786-556-1149

Mailing Address (include city, state and zip code)
4250 W 19th AVE, Hialeah, FL 33012

Street Address (include city, state and zip code)
4250 W 19th AVE, Hialeah, FL 33012

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

| Name of Affiliated or Connected Organization | Mailing Address | Relationship |
|--|-----------------|--------------|
| | | |

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.)
General

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 |
|-------------|------------------------------------|-----------------------------|
| Bryan Calvo | 4250 W 19th AVE, Hialeah, FL 33012 | Treasurer |

**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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ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Initial Filing for: Primary Treasurer Deputy Treasurer

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

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1. Committee
Maverick PAC

2. Telephone
(786) 566-1149

3. Name of Treasurer or Deputy Treasurer 4. Email (optional)
Bryan Calvo

5. Telephone (optional)
()

6. Mailing Address
4250 W 19th AVE, Hialeah, FL 33012

7. Street Address
4250 W 19th AVE, Hialeah, FL 33012

8. The following bank has been designated as the Primary Depository Secondary Depository

9. Name of Bank
Apollo Bank


10. Street Address
1255 W 49th ST.

11. City
Hialeah

12. State
FL

13. Zip Code
33012

14. Signature of Chairman

X 

15. Name of Chairman (Print or Type)

Bryan Calvo

Campaign Treasurer's Acceptance of Appointment

I, Bryan Calvo, do hereby accept the appointment as
(Please Print or Type)
treasurer or deputy treasurer for Maverick PAC
(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.**

03/14/2022

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

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

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ELECTIONS DEPARTMENT

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

Registered Agent and Office Information

| | | |
|---|--------------------|----------------------------------|
| Name Bryan Calvo | | Telephone 786-566-1149 |
| Street Address 4250 W 19th AVE | | |
| City Hialeah | State FL | Zip Code 33012 |
| Mailing Address 4250 W 19th AVE | | |
| City Hialeah | State FL | Zip Code 33012 |

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.



03/14/2022

Signature of Registered Agent

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 Maverick PAC | | |
| Street Address 4250 W 19th AVE | | Telephone 786-566-1149 |
| City Hialeah | State FL | Zip Code 33055 |



Signature of Chairperson

Bryan Calvo

03/14/2022

Printed Name of Chairperson

Date



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

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ELECTIONS DEPARTMENT

Candidate/Chairperson:

Bryan

Calvo

First Name

Middle Name

Last Name

Maverick PAC

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

(<https://www.miamidade.gov/global/elections/candidate-qualifying-handbook.page>)

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

(<https://www.miamidade.gov/global/elections/political-committee-resources.page>)

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: _____

03/14/2022

Primary Telephone Number: _____

786-566-1149

Alternate Telephone Number: _____

E-mail address: _____

bryancalvo3020@gmail.com

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



Candidate (office sought): _____

Candidate's Florida Voter Registration Number: _____

Political Committee: Maverick PAC

Party Executive Committee: _____

Other: _____

I, Bryan Calvo

(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

03/14/2022

Date

Day Time Telephone Number: 786-556-1149

Alternate Contact Number: _____

Email Address: bryancalvo3020@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.

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