STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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2025 JUN II PM 3:01

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

1. Full Name of Committee			Telephone					
Citizens for a S.	efer Community			(305) 428-2061				
			• "	(B) 110 206				
Mailing Address (include city, state and zip code)								
3389 Sherila Street PB 282 Hollywood, FL 33012								
2201 21001 5	STREET AD 201	Holly Most Fl		1				
Street Address (include city, state and zip code)								
Same								
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political								
committees)								
Name of Affiliated or Connected Organization	Mailing Address			Dolationahin				
				Relationship				
N/A								
			*					
		8						
	* .							
3. Area, Scope and Jurisdiction of the Committee								
All known political committee activities a authorise by his. the sape is man plotise								
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					
Joseph Tempelberg 3389 Sherian Street.		α . α	7	C .				
stept lempelberg	PMB 282	SS 09 Sherian Street. Tre		Jiel				
	(1)							
	Holly Wood, FL 3	3021		,				
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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				
Nosama Corlero-St	te 3389 Sherin Str Hollywool, FC 3	3051 ort BWP387	Chair Person				
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			
Nosama Contro-Jutz	3389 Sherib Stat. PMB 282 Hollywood, FC 33021	Shemff		republica			
	mmittee is Supporting:			H= F 11			
List Any Issues this Committee is Opposing:							
9. If this Committee is Sup	3: O						
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Any activity allowed under Florida law for the disposal of residual funds							
11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds							
Name of Bank or Depository & Account Number		Mailing Address					
Ocea Dah		2655 5 Le June Al. Cord Cubbs, FL 3D134					
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 Off	ficial Ma	ailing Address			
NIV							
STATE OF Florida		Miani	Date	COUNTY			
Organization is complete, true and correct. X Signature of Chairman of Political Committee , certify that the information in this Statement of May 5 2025 Date							
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