

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

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ELECTIONS DEPARTMENT

CHECK APPROPRIATE BOX:

Original Appointment of Treasurer Reappointment of Treasurer Deputy Treasurer

1. Committee or Organization The Truth For Our Community	2. Account Number	3. Telephone (305) 992-1113
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4. Name of Treasurer or Deputy Treasurer Jose Perez	5. Email (optional)	6. Telephone (optional) ()
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7. Mailing Address
329 East 9th Street, #201, Hialeah, Florida 33010

8. Street Address
Same

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

10. Name of Bank Banco Popular	11. Street Address 7900 Miami Lakes Drive West
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12. City Miami Lakes	13. State Florida	14. Zip Code 33016
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15. Signature of Chairman X 	16. Name of Chairman (Print or Type) Julio Ponce
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Campaign Treasurer's Acceptance of Appointment
I, Jose Perez, do hereby accept the appointment as

(Please Print or Type)
treasurer or deputy treasurer for The Truth For Our Community
(Committee or Organization)

**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.**

01/10/08
Date

X 
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF ORGANIZATION
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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ELECTIONS DEPARTMENT

1. Full Name of Committee

The Truth For Our Community/La Verdad Para Nuestra Comunidad

Telephone

305-992-1713

Mailing Address (include city, state and zip code)

14160 Palmetto Frontage Road, Suite 33, Miami Lakes, Florida 33016

Street Address (include city, state and zip code)

14160 Palmetto Frontage Road, Suite 33, Miami Lakes, Florida 33016

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
Informing Our Community: The Truth	14160 Palmetto Frontage Road, Suite 33, Miami Lakes, Florida 33016	ECO

3. Area, Scope and Jurisdiction of the Committee

Miami-Dade County and Municipalities within Miami-Dade County

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

Local Issues for Miami-Dade County and Municipalities

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
Jose Perez, CPA	329 East 9th Street, #201 Hialeah, Florida 33010	Treasurer

6. List By Name, Address, & Position, Other Principal Officers, Including Officers & Members of the Finance Committee, If Any (include chairperson's name)

Full Name	Mailing Address	Committee Title or Position
Julio Ponce	14160 Palmetto Frontage Road, Suite 33, Miami Lakes, Florida 33016	Chairperson

7. List By Name, Address, Office Sought, & Party Affiliation, Each Candidate or Other Individual that this Organization Is Supporting

Full Name	Mailing Address	Office Sought	Party
None			

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8. List Any Issues this Organization is Supporting: None

List Any Issues this Organization is Opposing: County Question #3 (Slot Machines)

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

None

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

Returned to Donors

11. List All Banks, Safety Deposit Boxes, or Other Depositories Used by this Organization for Electioneering Communications

Name of Bank or Depository & Account Number	Mailing Address
Banco Popular	7900 Miami Lakes Drive West, Miami Lakes, Florida 33016

12. List All Reports Required to be Filed by this Organization with Federal Officials, & the Names, Addresses, & Positions of Such Officials, If Any

Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address
None			

STATE OF Florida COUNTY Miami-Dade

I, Julio Ponce, certify that the information in this Statement of

Organization is complete, true, and correct.

X  Signature of Chairperson of Organization

1/10/08

Date

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

(Please Type)

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MIAMI DADE COUNTY
ELECTIONS DEPARTMENT

Original Appointment Change of Appointment

Registered Agent and Office Information

Name **Julio Ponce** Telephone **305-992-1113**

Street Address **14160 Frontage Road, Suite 33**

City **Miami Lakes** State **Florida** Zip Code **33016**

Mailing Address **14160 Frontage Road, Suite 33**

City **Miami Lakes** State **Florida** Zip Code **33016**

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 Division of Elections.


Signature of Registered Agent

January 10, 2008

Date

Former Registered Agent and Office Information (for changes only)

Name Telephone

Street Address

City State Zip Code

Committee or Organization Information

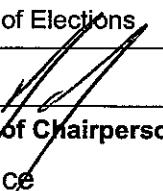
Name of Committee or Organization
The Truth For Our Community

Street Address **14160 Palmetto Frontage Road, Suite 33** Telephone **305-992-1113**

City **Miami Lakes** State **Florida** Zip Code **33016**

Committee or organization is registered with:

Division of Elections County **Miami-Dade** City _____


Signature of Chairperson

Julio Ponce

Print Name of Chairperson

January 10, 2008

Date