

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

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OFFICE OF THE CITY CLERK  
CITY OF MIAMI

**1. Full Name of Committee**

Let Get to Work, Miami

Telephone

305 442 0243

Mailing Address (include city, state and zip code)

122 Minorca Ave. Coral Gables, FI 33134

Street Address (include city, state and zip code)

122 Minorca Ave. Coral Gables, FI 33134

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
N/A		

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

Promotion of candidates and issues in the City of Miami, Florida

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

Political Committee to support candidates and issues that benefit the people of Miami.

**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 Sanchez-Gronlier	122 Minorca Ave. Coral Gables, FI 33134	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
Jose Sanchez-Gronlier	122 Minorca Ave. Coral Gables, FI 33134	Chairman

**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
N/A			

**8. List Any Issues this Committee is Supporting:** Better Government and Candidates for Miami

**List Any Issues this Committee is Opposing:** N/A

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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?**

Donate to 501 (C) (3) as allowed by Florida law

**11. List all Banks, Safety Deposit Boxes, or Other Depositories Used for Committee Funds**

Name of Bank or Depository & Account Number	Mailing Address
Interamerican Bank	1000 sw 57 Ave. West Miami, FI 33144

**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
N/A			

STATE OF Florida Miami Dade COUNTY

I, Jose Sanchez-Gronlier, certify that the information in this Statement of Organization is complete, true and correct.

**X**

Signature of Chairman of Political Committee

3/13/18

Date