

**STATEMENT OF ORGANIZATION  
OF POLITICAL COMMITTEE**

(PLEASE TYPE)

**RECEIVED ONLY**

**2017 AUG -8 PM 4: 15**

**CITY OF MIAMI BEACH  
OFFICE OF THE CITY CLERK .**

**1. Full Name of Committee**

Citizens for a Safe Miami Beach

Telephone

305-521-4394

Mailing Address (include city, state and zip code)

1020 Ocean Drive  
Miami Beach, Florida 33139

Street Address (include city, state and zip code)

1020 Ocean Drive  
Miami Beach, Florida 33139

**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**

Ballot issues and referenda in Miami Beach

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

**Business**

**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
Ana Cecilia Velasco	1020 Ocean Dr. Miami Beach, FL 33139	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
Ana Cecilia Velasco	1020 Ocean Dr. Miami Beach, FL 33139	Chairperson and Treasurer

**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: To be determined**

List Any Issues this Committee is Opposing: Resolution 2017-29908

**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?**

Return to contributors or contribute to an IRC section 501(c) or 527 organization

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

Name of Bank or Depository & Account Number	Mailing Address
City National Bank	300 71st Street Miami Beach, Florida 33141


**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
Form 990	Annually	IRS	Ogden, UT

STATE OF Florida Miami-Dade COUNTY

I, Ana Cecilia Velasco, certify that the information in this Statement of

Organization is complete, true and correct.

  
Signature of Chairman of Political Committee

8/8/2017  
Date