STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

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CITY OF MIAMIREACH OFFICE OF THE CITY CLERK

1. Full Name of Committee	
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Telephone

Miami Beach Fair for All

305 531-2424

Mailing Address (include city, state and zip code)

600 Brickell Avenue, Suite 1715, Miami Beach, FI 33130

Street Address (include city, state and zip code)

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		
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3. Area, Scope and Jurisdiction of the Committee

City of Miami Beach

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

Promoting fairness in commerce for all in Miami Beach

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
Ilan Atun	427 W 42 Street, Miami Beach, 33140	Chairman
Klara Fishman Sinbon	80 SW 8th Street Miami, Fl 33130	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				
llan Atun	427 SW 42 Street Miami Beach 33140		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	Office Sought				
N/A			-				
8. List Any Issues this Con	nmittee is Supporting:			1			
List Any Issues this Committee is Opposing: Ordinance to ban Scooter Rental on Memorial Day							
9. If this Committee is Sup	porting the Entire Ticket of a	Party, Give Name of Party					
N/A							
10. In the Event of Dissolut	tion, What Disposition will be	Made of Residual Funds?	22				
N/A		·.					
11. List all Banks, Safety D	eposit Boxes, or Other Depo	sitories Used for Committee	Funds				
Name of Bank or Depo	sitory & Account Number	Mailing	Address				
Suntrust	1900 E Hallandale Beach Blvd, Hallendale Beach, Fl 33009						
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		ailing Address			
SS4 Form 8871 Form 1120 POL Form 990	Upon Formation Upon Formation March 15, annually May 15, annually	IRS IRS IRS IRS	Ogden Ogden	UT 84201 UT 84201 UT 84201 UT 84201			
STATE OF Florida COUNTY							
Organization is complete, true and correct.							
Signature of Chairman of Political Committee Date							