

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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SEP 1 2021

CITY OF MIAMI BEACH
OFFICE OF THE CLERK

1. Full Name of Committee
Citizens For a Safe Miami Beach

Telephone
305-521-4394

Mailing Address (include city, state and zip code)
1688 Meridian Ave
Suites 600-700-6th Floor
Miami Beach, FL 33139

Street Address (include city, state and zip code)
1688 Meridian Ave
Suites 600-700-6th Floor
Miami Beach, FL 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
Natalie Kato	1688 Meridian Ave Suites 600-700-6th Floor 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 Velasco	1688 Meridian Ave Suites 600-700-6th Floor Miami Beach, FL 33139	Chairperson

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: referendum on 2am alcohol ban

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?
 To be distributed to a 527 organization or charitable entity in compliance with Florida Chapter 106

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

Name of Bank or Depository & Account Number	Mailing Address
Suntrust Bank	3522 Thomasville Rd Tallahassee, FL 32309

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
8870 990	Upon formation Annually; March 15	IRS	Ogden, Utah 84201

STATE OF Florida Dade COUNTY

I, Ana Velasco, certify that the information in this Statement of Organization is complete, true and correct.

X _____ Date

Signature of Chairman of Political Committee