

**RECEIVED**

OFFICE USE ONLY  
SEP 16 2010

CITY OF NORTH MIAMI  
CITY CLERKS OFFICE

# STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

## 1. Full Name of Committee

Concerned Citizen's of North Miami

Telephone

786-553-8555

Mailing Address (include city, state and zip code)

12128 NW 2nd Avenue, N. Miami, FL 33168

Street Address (include city, state and zip code)

12128 NW 2nd Avenue, N. Miami, FL 33168

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
None	none	

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

City of North Miami, Districts; 1-2-3-4

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

Citizen's Information Resources, a Grass root organization of citizen's.

## 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
Beverly Hilton	12495 NW 6th Ave., N. Miami 33168	Chair
Virgina Gilmore	1635 NW 120th Street, Miami 33167	1st-Vice Chair
Carol Keys	12700 Bis., Blvd., #401, Miami 33181	2nd-Vice Chair
Jeal McCurdie	390 NW 125 St., N. Miami 33168	2st- Secretary
Catherine Christofis	2430 NE 135 St., # 206 Miami 33181	Treasurer
Linda Colebrook	170 NW 125 St., N. Miami 33168	1st-Secretary

**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
Beverly Hilton Virgina Gilmore Carol Keys Samuel Henriques Carol Pragor	12495 N.W 6th Ave., N. Miami 33168 1625 N.W 120th St., N. Miami 33167 12700 Biscayne Blvd., #401 Miami 33181 1200 NW 123rd Street, N. Miami 331668 2509 N.E 135th Street, N. Miami 33181	Chair 1st Chair 2nd-Chair Board member -1 Board member -2

**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
None	none	none	

**8. List Any Issues this Committee is Supporting:** Any Community Grass root Organization's Issues

**List Any Issues this Committee is Opposing:** North Miami CRA-27 Million Dollars Bond

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

Democratic Party

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

Donated to a Non- profit 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 Bank Atlantic	13400 Biscayne Blvd., N. Miami 33181 12655 North 6th Avenue, N. Miami, FL 33161

**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

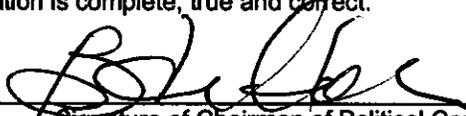
STATE OF Florida \*

Date \_\_\_\_\_ COUNTY

I, Beverly Hilton, certify that the information in this Statement of

Organization is complete, true and correct.

X

  
Signature of Chairman of Political Committee

9/16/10  
Date

# WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

# RECEIVED

OCT 12 2010

CITY OF NORTH MIAMI  
CITY CLERKS OFFICE

OFFICE USE ONLY

Concerned Citizens of N. Miami  
Name

Pol. Committee  
Office Sought

13128 NW 2nd Ave,

Address

N. Miami

City

FL 33168

State

Zip Code

Candidate

Committee of Continuous Existence

Electioneering Communication Organization

Political Committee

Party Executive Committee

Check box if address has changed since last report.

Check here if PC, CCE, or ECO has DISBANDED and will no longer file reports.

### TYPE OF REPORT (Check Appropriate Box)

#### QUARTERLY REPORTS

January

April

July

October

#### PRIMARY ELECTION

32nd day prior

18th day prior

4th day prior

#### GENERAL ELECTION

46th day prior

32nd day prior

18th day prior

4th day prior

TERMINATION REPORT

SPECIAL ELECTION

### NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

X Sept. 16, 2010 THROUGH Sept. 30, 2010

[Signature]  
Signature

10/12/10  
Date

#### SIGNATURES REQUIRED FOR:

##### Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

##### Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

##### Committees of Continuous Existence and Electioneering Communication Organizations

Treasurer (s. 106.04(4)(c), F.S.)

##### Party Executive Committees

Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

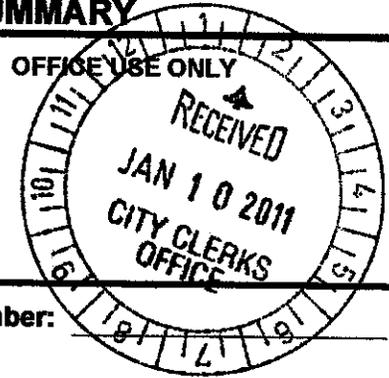
(1) Concerned Citizens of North Miami, Inc  
Name

(2) 12128 NW 2nd Avenue  
Address (number and street)

North Miami, Florida 33168  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_



(4) Check appropriate box(es):

- |   |   |
|---|---|
| <input type="checkbox"/> Candidate (office sought): _____             | <input type="checkbox"/> CHECK IF PC HAS DISBANDED  |
| <input type="checkbox"/> Political Committee                          | <input type="checkbox"/> CHECK IF CCE HAS DISBANDED   |
| <input checked="" type="checkbox"/> Committee of Continuous Existence | <input type="checkbox"/> CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED |
| <input type="checkbox"/> Party Executive Committee                    |   |
| <input type="checkbox"/> Electioneering Communication                 |   |

**(5) REPORT IDENTIFIERS**

Cover Period: From \_\_\_\_ / \_\_\_\_ / 2010 To 01 / 10 / 2011 Report Type \_\_\_\_\_

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>250.00</u>
Loans	\$	<u>250.00</u>
Total Monetary	\$	<u>500.00</u>
In-Kind	\$	<u>200.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>473.00</u>
Transfers to Office Account	\$	_____
Total Monetary	\$	<u>500.00</u>

**(8) Other Distributions**

\$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ 500.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 500.00

**(11) CERTIFICATION**

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Virginia Gilmore  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X** Virginia Gilmore  
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Beverly Hilton  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

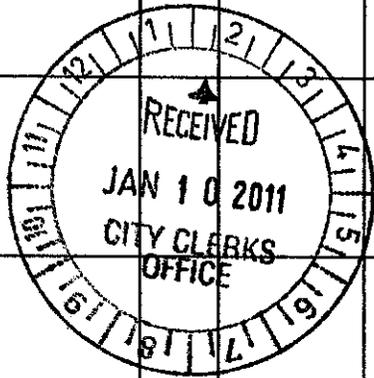
**X** Beverly Hilton  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Concerned of North Miami (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 11 / 2010 through 01 / 10 / 2011 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
10 / 20 / 2010	Carol Keys 12700 Biscayne Blvd., N. Miami, FL 33181	I	PA	CHE	Loan		250
1							
10 / 20 / 2010	Beverly Hilton 12495 NW 6th Avenue	I	Directo r	Credit Card	Loan		250
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							



## CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Concern Citizens of North Miami

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 11 / 2010 through 01 / 10 / 2011

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
10 / 25 / 10			T-Shirts		\$243.00
1					
12 / 20 / 10	Party r us		Tent, Chairs Bounch - House		\$230.00
2					
///					
///					
///					
///					
///					
///					
///					
///					

