Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Our City Our Future PAC 13420 NW 7 AVE ADDRESS (number and street) (Check if address is changed) NORTH MIAMI FL 33168 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Jeffy@jeffyvan.com (Check if address is changed) Optional Second E-Mail Address shilairets@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.shilaire.com/haitianamericansforbiden (Check if address is changed) DATE 2020 C00757542 FEC IDENTIFICATION NUMBER > 3. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Saint-Hilaire, Sandra, , , Type or Print Name of Treasurer Saint-Hilaire, Sandra, , , [Electronically Filed] 09 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
	PE OF COMMITTEE					
	naidate	lidate Committee:				
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	ne of didate					
Candidate Party Affiliat		Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	ne of didate					
Par	ty Con	nmittee:				
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is a			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
(5)		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joir	nt Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

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Write or Type Committee Name	
Our City Our Future PAC	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative,	, or Leadership PAC Sponsor
NONE	
Mailing Address	
	1
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representation	ative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the p books and records. 	person in possession of committee
Saint-Hilaire, Sandra, , , Full Name	
Mailing Address Label 1 AVE	
1	
NORTH MIAMI	33161
Title or Position CITY STATE	ZIP CODE
Treasurer Telephone number	305 - 879 - 8896
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee any designated agent (e.g., assistant treasurer).	; and the name and address of
Full Name Saint-Hilaire, Sandra, , ,	ı
of Treasurer	
Mailing Address 12655 NE 1 AVE	
NORTH MIAMI	33161
CITY STATE Title or Position	ZIP CODE
-	305 - 879 - 8896

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Full Name of Designated Agent Monde	esir, Jeffy Van, , ,					
Mailing Address	13420 NW 7 AVE					
	North Miami CITY	FL 331	61 ZIP CODE			
Title or Position Chairperson	Tel	ephone number 786 -	- 970 - 7403			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. TD Bank						
Mailing Address	12620 biscayne blvd					
-						
	North Miami	FL 331	81			
_	CITY	STATE	ZIP CODE			
Name of Bank, Deposito	ory, etc.					
Mailing Address						
	CITY	STATE	ZIP CODE			

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1N Transaction ID:

Independent expenditure-only political committees

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.