

STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

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1. Full Name of Committee

CITIZENS FOR A BETTER FORT MYERS GOVERNMENT

Telephone

239-265-2575

Mailing Address (include city, state and zip code)

2726 LEMON STREET, FORT MYERS, FL 33916

Street Address (include city, state and zip code)

2726 LEMON STREET, FORT MYERS, FL 33916

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

Name of Affiliated or Connected Organization	Mailing Address	Relationship
NA	NA	NA

3. Area, Scope and Jurisdiction of the Committee

CITY OF FORT MYERS

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

TERM LIMITS, FORT MYERS POLICE DEPARTMENT, CIVIL RIGHTS

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
ANTHONY THOMAS	2726 LEMON STREET, FORT MYERS, FL, 33916	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
1) ANTHONY THOMAS 2) CHRISTINE MATTHEWS 3) JACQUELYN McMILLER	1) 2726 Lemon Street, Fort Myers, FL 33916 2) 3426 Fowler Street, Fort Myers, FL 33901 3) 1786 Raleigh Street, Fort Myers, FL 33916	1) Chairman 2) Vice Chair 3) Secretary

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
NA	NA	NA	NA

8. List Any Issues this Committee is Supporting: Term limits for Fort Myers City Council, Elected police chief-Fort Myers Police Department, Banning housing discrimination for returning citizens, Banning employment discrimination of returning citizens; Citizen review board for the Fort Myers Police Department; Decriminalization of marijuana and transfer all city law enforcement services to the Lee County Sheriff Department.

List Any Issues this Committee is Opposing:

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

10. In the Event of Dissolution, What Disposition will be Made of Residual Funds?
Donation to 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
Wells Fargo	1530 Heitman Street, Fort Myers, 33901

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
NA	NA	NA	NA

STATE OF FLORIDA LEE COUNTY

I, Anthony Thomas, certify that the information in this Statement of

Organization is complete, true and correct.

X  06/5/2019
Signature of Chairman of Political Committee Date