

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)
(Please print or type)

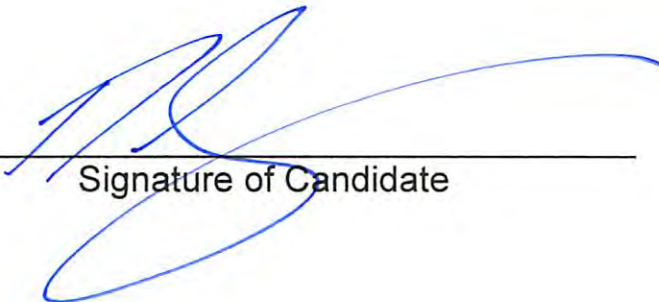
OFFICE USE ONLY

09-09-15 15:03 RCVD *SKN*

I, Daniel Gielchinsky,
candidate for the office of commissioner;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

September 9, 2015
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

09-16-15 16:45 RCVD SKN

09-09-15 15:03 RCVD SKN

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Daniel Gielchinsky

3. Address (include post office box or street, city, state, zip code)

8877 Collins Ave.
#1106
Surfside, FL 33154

4. Telephone

(305) 763-8708

5. E-mail address

dan@dyslaw.com

6. Office sought (include district, circuit, group number)

Commissioner

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Daniel Gielchinsky

11. Mailing Address

1177 Kane Concourse, Suite 302

12. Telephone

(305) 763-8708

13. City

Bay Harbor Islands

14. County

Miami-Dade

15. State

FL

16. Zip Code

33154

17. E-mail address

dan@dyslaw.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Citibank

20. Address

9525 Harding Ave

21. City

Surfside

22. County

Miami Dade

23. State

FL

24. Zip Code

33154

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

September 9, 2015

26. Signature of Candidate

X

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, Daniel Gielchinsky, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

9/9/15

Date

Signature of Campaign Treasurer or Deputy Treasurer

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky
Name

(2) 1177 Kane Concourse, Suite 302
Address (number and street)

Bay Harbor Islands, FL 33154
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

TOWN OF SURFSIDE

OCT12'15 9:47AM

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 09 / 01 / 15 To 09 / 30 / 15 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . 0

Loans \$ _____, _____, 0 . 0

Total Monetary \$ _____, _____, 0 . 0

In-Kind \$ _____, _____, 0 . 0

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 . 0

Transfers to Office Account \$ _____, _____, 0 . 0

Total Monetary \$ _____, _____, 0 . 0

(8) Other Distributions

\$ _____, _____, 0 . 0

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 0 . 0

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0 . 0

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number _____

(3) Cover Period 09 / 01 / 15 through 09 / 30 / 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /	none						
/ /							
/ /							
/ /							
/ /							
/ /							
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/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number _____

(3) Cover Period 09 / 01 / 15 through 09 / 30 / 15

(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					
/ /	none				
/ /					
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

TOWN OF SURFSIDE

OCT12'15 9:47AM

Name

Daniel Gielchinsky

I.D. Number

Address (number and street)

8877 Collins Ave, #1106

City, State, Zip Code

Surfside, FL 33154

CHECK IF ADDRESS HAS CHANGED

Candidate for:

Mayor

Commissioner, District Surfside

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name Compiling Treasurer's Reports Cover Period 9/1/15 through 9/30/15

Report Type Original Amendment

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.

Daniel Gielchinsky

(Type name) Treasurer Deputy Treasurer

X
Signature

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

Daniel Gielchinsky

(Type name) Candidate

X
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

11-03-15 12:15 RCVD *sun*

(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10 / 01 / 15 To 10 / 31 / 15 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, 3,440 .00

Loans \$ _____, 0 .00

Total Monetary \$ _____, 0 .00

In-Kind \$ _____, 0 .00

(7) Expenditures This Report

Monetary Expenditures \$ _____, 0 .00

Transfers to Office Account \$ _____, 0 .00

Total Monetary \$ _____, 0 .00

(8) Other Distributions

\$ _____, 0 .00

(9) TOTAL Monetary Contributions To Date

\$ _____, 3,440 .00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 0 .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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X

Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number _____

(3) Cover Period 10 / 01 / 15 through 10 / 31 / 15 (4) Page 1 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10 / 07 / 15 1	Dunn, Steven M. Dunn, Sandra T. 208 Park Dr. Bal Harbour, FL 33154	I	attorney	CHE			\$500.00
10 / 07 / 15 2	Schloss, David 244 Landings Blvd. Weston, FL 33327	I	marketing	CHE			\$250.00
10 / 21 / 15 3	Price, Stanley B. Price, Barbara 6000 Island Blvd. Aventura, FL 33160	I	attorney	CHE			\$500.00
10 / 21 / 15 4	Goldstein, Richard 1450 Brickell Ave. Miami, FL 33131	I	attorney	CHE			\$100.00
10 / 26 / 15 5	PA Berger Firm 3050 Biscayne Blvd Miami, FL 33137	B	attorney	CHE			\$90.00
10 / 21 / 15 6	Jeffrey W Gutchess, PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 7	Carlos F Junco, PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number _____

(3) Cover Period 10 / 01 / 15 through 10 / 31 / 15 (4) Page 2 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10 / 21 / 15 8	Alan J Kazan PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 9	Michael N Kreitzer PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 10	John M Kuhn PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 11	Steven D Lear PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$150.00
10 / 21 / 15 12	Adam D Lustig PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 13	Mindy A Mora 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$50.00
10 / 21 / 15 14	Howard E Nelson 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number _____

(3) Cover Period 10 / 01 / 15 through 10 / 31 / 15 (4) Page 3 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10 / 21 / 15 15	Marshall R Pasternack PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 16	Jay M Sakalo PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 17	James W Shindell 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 18	Jeffrey I Snyder PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$100.00
10 / 21 / 15 19	David W Trench PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$150.00
10 / 21 / 15 20	Robert W Turken PA 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$200.00
10 / 21 / 15 21	Scott L Baena 1450 Brickell Ave. Miami, FL 33131	B	attorney	CHE			\$250.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number _____

(3) Cover Period 10 / 01 / 15 through 10 / 31 / 15 (4) Page 4 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
10 / 29 / 15	Salver, Seth E Salver, Perla 10155 Collins Ave Bal Harbour, FL 33154	I	accountant	CHE			\$100.00
22							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 15 through 10 / 31 / 15

(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					
/ /	none				
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name

Daniel Gelchinsky

I.D. Number

Address (number and street)

8877 Collins Ave, #1106

City, State, Zip Code

Suicide, FL 33154

CHECK IF ADDRESS HAS CHANGED

11-03-15 10:15 RCVD SM

Candidate for:

Mayor

Commissioner, District Suicide

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name Campaign Treasurers Reports Cover Period 10/1/15 through 10/31/15

Report Type Original Amendment

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.

Daniel Gelchinsky
(Type name) Treasurer Deputy Treasurer

X
Signature

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

Daniel Gelchinsky
(Type name) Candidate

X
Signature



TOWN OF SURFSIDE

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154

GENERAL ELECTION – MARCH 15, 2016

SWORN STATEMENT OF QUALIFICATION

Pursuant to Article VI, Section 102 of the Town of Surfside Charter, this form must be submitted simultaneously with the nominating petitions and qualifying fee of \$25.00 made payable to the Town of Surfside.

STATE OF FLORIDA }

COUNTY OF MIAMI-DADE }

TOWN OF SURFSIDE }

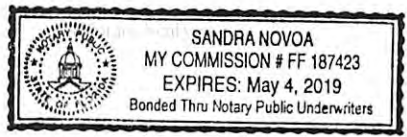
I solemnly swear (or affirm) under oath, that my name is Daniel Gelchinsky, that I am a Citizen of the United States, a qualified elector of Miami Dade County and the Town of Surfside, Florida; that my address is 8877 Collins Ave, #1106, my occupation is attorney; that I have been a resident of the Town of Surfside since 2011; that I will be at least twenty-one (21) years of age by December 7, 2015 and that if elected, I will willingly serve as Commissioner (Mayor or Commissioner) of the Town of Surfside, if elected.

[Signature]
Signature of Candidate

11/20/2015
Date

Sworn to and subscribed before me this 20th day of November, 2016.

[Signature] Sandra Novoa
NOTARY PUBLIC
Sandra Novoa
PRINTED NAME OF NOTARY



DECLARATION FOR CANDIDATES NOT AUTOMATICALLY COVERED

by the **Mandatory Provisions** of the
Miami-Dade Ethical Campaign Practices Ordinance
Miami-Dade County Code at 2-11.1.1(C) (1)

The Mandatory Fair Campaign Practices Ordinance at Sec. 2-11.1.1(C) of the Miami-Dade County Code extends to—

- Candidates, and their respective campaign staffs, for Miami-Dade Co. Commissioners or Mayor;
- Candidates, and their respective campaign staffs, for Miami-Dade Co. Community Councils;
- Candidates, and their respective campaign staffs, for any municipal elective office within Miami-Dade County;
- Candidates, and their respective campaign staffs, for the Co. Property Appraiser.

Other candidates for elective office with a constituency in whole or in part in Miami-Dade Co. who are *not* required to comply with the Mandatory Fair Campaign Practices Ordinance *may* at any time declare that they agree to abide by the Mandatory Fair Campaign Practices Ordinance.

The Mandatory Fair Campaign Practices Ordinance states that a candidate shall not—

- (a) With actual malice make or cause to be made any untrue oral statement about another candidate or a member of his or her family or staff that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or avoided or injured in his or her business or occupation;
- (b) With actual malice publish, or cause to be published, by writing, printing, picture, effigy, sign, or otherwise than by mere speech any untrue statement about another candidate or a member of his or her family or staff that exposes the person to hatred, contempt, or ridicule or causes the person to be shunned or avoided or injured in his or her business or occupation;
- (c) Willfully injure, deface, or damage or cause to be injured, defaced, or damaged, by any means, any campaign poster, sign, leaflet, handbill, literature, or other campaign material of another candidate;
- (d) Knowingly obtain, or cause to be obtained, the campaign property of another candidate with the intent to temporarily or permanently deprive the candidate of a right to the property or its benefit; *or*
- (e) Knowingly file with the Ethics Commission a groundless or frivolous complaint against another candidate.

If you are not automatically covered by the Mandatory Fair Campaign Practices Ordinance, but you have a constituency in whole or in part in Miami-Dade County and you would like to abide by the Mandatory Fair Campaign Practices Ordinance, please sign and date below. Once signed, the Declaration is deemed irrevocable for the duration of the campaign.

I, Daniel Gelchinsky, a candidate for the office of
please print your name
Commissioner in Sartside, FL
elective office sought county, municipality, or other jurisdiction

understand that I am not automatically bound by the Mandatory Fair Campaign Practices Ordinance of Miami-Dade Co. Nevertheless, I choose to abide by the Mandatory Fair Campaign Practices Ordinance and recognize the compulsory jurisdiction of the Ethics Commission and its authority to decide whether I have violated the ordinance at Sec. 2-11.1.1(C) of the County Code. I further understand that if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any.

x

[Signature]
Signature

11/20/2015
Date

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

11-20-15 A09:44 RCVD *gln*

OFFICE USE ONLY

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)

I, Daniel Gielchinsky
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * – NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of Commissioner, _____,
(office) (district #)

_____ ; I am a qualified elector of Surfside County, Florida;
(circuit #) (group or seat #)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

X

[Signature]
Signature of Candidate

(305) 763 8708
Telephone Number

dan@dylaw.com
Email Address

8877 Collins Ave, #1106 Surfside FL 33154
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 119025611

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

Daniel Gil-chin-skee

STATE OF FLORIDA
COUNTY OF Miami Dade

Sworn to (or affirmed) and subscribed before me this 20th day of November, 2015.

Personally Known: _____ or

Produced Identification:

Type of Identification Produced: DL # G425-179-76-401-0



[Signature]
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public

**YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION
PLEASE SIGN AND PRINT YOUR NAME CLEARLY**

NOMINATING PETITION FOR MAYOR OR COMMISSIONER TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Daniel Gelchinsky for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 15, 2016.

This petition must be filed with the Town Clerk not more than fifty-five and not less than thirty-five days prior to the election.

Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>[Blank]</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/2015</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>MARTIN W. THPLIN</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>[Blank]</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>BARBARA COHEN</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>DAVID ANTONIA, DVM</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>LISA RUBIN</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>KAREN GELLER</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>LOUIS SCHERR</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>LINDA ALVARO</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>Alexandio Ronder</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>George Kouznetsov</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10/1/15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>Don Schuchor</u>	Address: <u>[Blank]</u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u>[Blank]</u>
Print Name: <u>Mitchell Gutierrez</u>	Address: <u>[Blank]</u>	

STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 13 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: [Signature]
 Address of Circulator: 8577 Collins Ave, Suite 6 FL 33154
 Mail address of Circulator: [Blank]

ACCEPTANCE OF NOMINATION

I hereby accept the nomination of Commissioner (Mayor or Commissioner) and agree to

Signature of Candidate: [Signature] Date: 11/1/2015

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION
PLEASE SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER
TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Daniel Grechinsky for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 15, 2016.

This petition must be filed with the Town Clerk not more than fifty-five and not less than thirty-five days prior to the election.

Signature: <u>[Signature]</u>	Date: <u>10-9-15</u>	Voters Reg. # <u> </u>
Print Name: <u>Jonathan Rubinstein</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u> </u>
Print Name: <u>SERGIO GURVITZCH</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u> </u>
Print Name: <u>ISHAGH CHEPATOVA</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u> </u>
Print Name: <u>Daniel Mizundhi</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u> </u>
Print Name: <u>Lea Jacoby</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10-1-15</u>	Voters Reg. # <u> </u>
Print Name: <u>Kayla Azari</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10-13-15</u>	Voters Reg. # <u> </u>
Print Name: <u>Michael SHABAN</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/13/15</u>	Voters Reg. # <u> </u>
Print Name: <u>Eli BURGERMAN</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/15/2015</u>	Voters Reg. # <u> </u>
Print Name: <u>[Signature]</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. # <u> </u>
Print Name: <u>April Citron</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. # <u> </u>
Print Name: <u>HAROLD ROSENSTEIN</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10-18-15</u>	Voters Reg. # <u> </u>
Print Name: <u>Judith YERUSHALMY</u>	Address: <u> </u>	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. # <u> </u>
Print Name: <u>Michael J. Verch</u>	Address: <u> </u>	

STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 13 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: [Signature]
Address of Circulator: 8577 Collier Ave, Surfside, FL
Email address of Circulator: dan@dgrechinsky.com

ACCEPTANCE OF NOMINATION

I hereby accept the nomination of Commissioner (Mayor or Commissioner) and agree to

Signature of Candidate: [Signature] Date: 4-20-2015

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION
PLEASE SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER
TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Daniel Gutches for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 15, 2016.

This petition must be filed with the Town Clerk not more than ~~thirty-five~~ thirty-five days prior to the election.

Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>Yehuda Marcus</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>ABE SENTER</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>[Signature]</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>ELANA STURM</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>Mitt Vigoda</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/2015</u>	Voters Reg. #
Print Name: <u>MARK BLUMSTEIN</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>Chana Cohen</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>JOEL BAUM</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>[Signature]</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>EDWARD M ROSENBERG</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>10/18/15</u>	Voters Reg. #
Print Name: <u>SHABITZ SAHA Shora Putra</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>11/5/15</u>	Voters Reg. #
Print Name: <u>BARRY COHEN</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>11/15/15</u>	Voters Reg. #
Print Name: <u>YACOV SAIDOF</u>	Address:	

STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 13 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: [Signature]
Address of Circulator: 8877 Wilshire Ave, Suite 600 33154
Email address of Circulator: [Email]

ACCEPTANCE OF NOMINATION

I hereby accept the nomination of Commissioner (Mayor or Commissioner) and agree to

Signature of Candidate: [Signature] Date: 11/20/2015

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION
PLEASE SIGN AND PRINT YOUR NAME CLEARLY

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate David/Grubbs for
the office of Commissioner (Mayor or Commissioner) at an election to be held on March 15,
2016.

This petition must be filed with the Town Clerk not more than fifty-five and not less than thirty-five days prior to the election.

Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # <u>10000000</u>
Print Name: <u>Shlomo Diamond</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # _____
Print Name: <u>Edward Ohayon</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # <u>10000000</u>
Print Name: <u>David Schwartz</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # _____
Print Name: <u>Faigy Stephanie Schwartz</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # _____
Print Name: <u>Andrey Odlekin</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # _____
Print Name: <u>SERGIO GONZALEZ</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11/15/15</u>	Voters Reg. # _____
Print Name: <u>Joe Tabas</u>	Address: _____	
Signature: <u>[Signature]</u>	Date: <u>11-15-15</u>	Voters Reg. # _____
Print Name: <u>Susan Tabas</u>	Address: _____	
Signature: _____	Date: _____	Voters Reg. # _____
Print Name: _____	Address: _____	
Signature: _____	Date: _____	Voters Reg. # _____
Print Name: _____	Address: _____	
Signature: _____	Date: _____	Voters Reg. # _____
Print Name: _____	Address: _____	
Signature: _____	Date: _____	Voters Reg. # _____
Print Name: _____	Address: _____	
Signature: _____	Date: _____	Voters Reg. # _____
Print Name: _____	Address: _____	

STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 8 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: [Signature]
Address of Circulator: 8577 Collins Ave, S. Bk, Fl
Email address of Circulator: [Email]

ACCEPTANCE OF NOMINATION

I hereby accept the nomination of Commissioner (Mayor or Commissioner) and agree to

Signature of Candidate: [Signature] Date: 11-20-2015



TOWN OF SURFSIDE
Office of the Town Clerk

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra Novoa, MMC, Town Clerk

November 25, 2015

Mr. Daniel Gielchinsky
8877 Collins Avenue, #1106
Surfside, FL 33154

Dear Mr. Gielchinsky:

I am pleased to inform you that according to records on file in this office, you have qualified as a candidate for the Office of Commissioner for the Town of Surfside. Your name will be placed on the ballot for the March 15, 2016 Municipal Election.

Congratulations on your qualification and if I can assist in any way throughout the process, please feel free to contact me.

Very truly yours,


Sandra Novoa, MMC
Town Clerk

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

OFFICE USE ONLY

12-03-15 A 11:02 RCVD *gan*

(5) Report Identifiers

Cover Period: From 11 / 01 / 15 To 11 / 30 / 15 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 930.00

Loans \$ _____ , _____ , 0.0

Total Monetary \$ _____ , _____ , 0.0

In-Kind \$ _____ , _____ , 0.0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 675.00

Transfers to Office Account \$ _____ , _____ , 0.0

Total Monetary \$ _____ , _____ , 675.00

(8) Other Distributions

\$ _____ , _____ , 0.0

(9) TOTAL Monetary Contributions To Date

\$ _____ , 4 , 370.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 675.00

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky

(2) I.D. Number _____

(3) Cover Period 11 / 01 / 15 through 11 / 30 / 15

(4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)		(9)	(10)	(11)	(12)
			Contributor Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
11 / 16 / 15	1	Nicholas M. Wigoda 600 92nd Street Surfside, FL 33154	I	RE broker	CHE			\$250.00
11 / 16 / 15	2	Krinzman, Huss & Lubetsky, LLP 800 Brickell Ave Ste. 1501 Miami, FL 33131	B	law firm	CHE			\$250.00
11 / 20 / 15	3	Dubroff, Jonathan 78 Dwight Place Englewood, NJ 07631	I	finance	CHE			\$180.00
11 / 30 / 15	4	Lichter, David and Mayra 1932 NE 119th Road North Miami, FL 33181	I	mediation	CHE			\$250.00
/ /								
/ /								
/ /								
/ /								

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number _____

(3) Cover Period 11 / 01 / 15 through 11 / 30 / 15

(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					
11 / 24 / 15	Town of Surfside 9293 HARDING AVENUE SURFSIDE, FL 33154	qualifying fee			
1			CAN		\$25.00
11 / 25 / 15	Jay Spok 1665 Poinsettia Drive Fort Lauderdale, FL 33305	website design			
2			CAN		\$500.00
11 / 25 / 15	Jay Spok 1665 Poinsettia Drive Fort Lauderdale, FL 33305	social media			
3			CAN		\$150.00
///					
///					
///					
///					
///					

gdn

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name

Daniel Gielchinsky

I.D. Number

Address (number and street)

1177 Kane Concourse, #302

City, State, Zip Code

Bay Harbor Islands, FL 33154

CHECK IF ADDRESS HAS CHANGED

12-03-15A11:03 RCVD SKN

Candidate for:

Mayor

Commissioner, District Switside

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name monthly report Cover Period 11-1-15 through 11-30-15

Report Type Original Amendment

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.

Daniel Gielchinsky
(Type name) Treasurer Deputy Treasurer

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

Daniel Gielchinsky
(Type name) Candidate

X

Signature

X

Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: 75

(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 12 / 01 / 15 To 12 / 31 / 15 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, 3 , 440 . 00

Loans \$, , 0 . 0

Total Monetary \$, , 0 . 0

In-Kind \$, , 0 . 0

(7) Expenditures This Report

Monetary Expenditures \$, , 1,448 . 20

Transfers to Office Account \$, , 0 . 0

Total Monetary \$, , 1,448 . 20

(8) Other Distributions

\$, , 0 . 0

(9) TOTAL Monetary Contributions To Date

\$, 7 , 810 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 2 , 163 . 20

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X
Signature 

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X
Signature 

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky

(2) I.D. Number 45

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 15

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
12 / 2 / 15 1	Fish Advertising Inc. 9232 Abbott Ave Surfside, FL 33154	B	advertising	CHE			\$500.00
12 / 9 / 15 2	Martin W. Taplin 1177 Kane Concourse Suite 302 Bay Harbor Islands, FL 33154	I	hospitality	CHE			\$250.00
12 / 9 / 15 3	Bal Harbor Plastic Surgery Associates 1140 Kane Concourse Floor 3 Bay Harbor Islands, FL 33154	B	medical	CHE			\$500.00
12 / 15 / 15 4	Sheridan Wealth Advisors, Inc. 1108 Kane Concourse Suite 307 Bay Harbor Islands, FL 33154	B	finance	CHE			\$100.00
12 / 21 / 15 5	Mitch and Dana Permuy 400 Beach Dr. NE Unit 2806 St. Petersburg, FL 33701	I	construction	CHE			\$995.00
12 / 21 / 15 6	Cathy and Roberto Jimenez 565 Solando Prado Coral Gables, FL 33156	I	construction	CHE			\$995.00
12 / 23 / 15 7	David and Stephanie Schwartz 9595 Collins Ave Apt. 401 Surfside, FL 33154	I	mortgages	CHE			\$100.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number 45

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 15

(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					
12 / 7 / 15 1	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	public relations	CAN		\$1,300.00
12 / 8 / 15 2	Squarespace, Inc. 459 Broadway Fifth Floor New York, NY 10013	website / domain	ECC		\$20.00
12 / 9 / 15 3	Squarespace, Inc. 459 Broadway Fifth Floor New York, NY 10013	website / domain	ECC		\$12.00
12 / 18 / 15 4	Jay Spok 1665 Poinsettia Drive Fort Lauderdale, FL 33305	social media / web	CAN		\$150.00
12 / 23 / 15 5	Stripe 3180 18th St San Francisco, CA 94110	web payment processing fee	CAN		\$6.20

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name

Daniel Gelchinsky

I.D. Number

45

Address (number and street)

1177 Kane Concourse, #302

City, State, Zip Code

Bay Harbor Islands, FL 33154

CHECK IF ADDRESS HAS CHANGED

TOWN OF SURFSIDE

JAN11'16 12:05PM

Candidate for:

Mayor

Commissioner, District Surfside

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name Campaign Treasurer's Report Cover Period 12/1/15 through 12/31/15

Report Type Original Amendment

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.

Daniel Gelchinsky

(Type name) Treasurer Deputy Treasurer

X

Signature

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

Daniel Gelchinsky

(Type name) Candidate

X

Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name Daniel Gelikinsky (2) I.D. Number 45
(3) Report Name Campaign Treasurers Report (4) Cover Period 12/1/15 through 12/31/15
(5) Report Type Original Amendment (6) Page 1 of 1

(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	(10) Name of Organization Employed By (if not directly hired by campaign)	(11) Amendment Type

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: 45

FEB 4 16 11:00AM

OFFICE USE ONLY

TOWN OF SURFSIDE

(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 1 / 01 / 16 To 1 / 31 / 16 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 200 . 00

Loans \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 0 . 0

In-Kind \$ _____ , _____ , 0 . 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 1,479 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 1,479 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 8 , 010 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 3 , 642 . 20

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number 45

(3) Cover Period 1 / 01 / 16 through 1 / 31 / 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
1 / 6 / 16	Horn Capital Realty, Inc. 1177 Kane Concourse Suite 301 Bay Harbor Islands, FL 33154	B	real estate	CHE			\$200.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number 45

(3) Cover Period 1 / 01 / 16 through 1 / 31 / 16

(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					
1 / 8 / 16 1	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	public relations	CAN		\$1,300.00
1 / 8 / 16 2	Squarespace, Inc. 459 Broadway Fifth Floor New York, NY 10013	website / domain	ECC		\$12.00
1 / 8 / 16 3	Citibank 9525 Harding Ave Surfside, FL 33154	account service fee	CAN		\$17.00
1 / 15 / 16 4	Jay Spok 1665 Poinsettia Drive Fort Lauderdale, FL 33305	social media / web	CAN		\$150.00
 / / 					
 / / 					
 / / 					
 / / 					
 / / 					

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name Daniel Gielchinsky

I.D. Number 45

Address (number and street) 1177 Kane Concourse, Suite 302

City, State, Zip Code Boy Harbor Islands FL 33154

CHECK IF ADDRESS HAS CHANGED

TOWN OF SURFSIDE

FEB 4 '16 11:01AM

Candidate for:

- Mayor
- Commissioner, District Surfside
- Property Appraiser
- Clerk of the Circuit Courts
- Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name Campaign Treasurer Report Cover Period 1/1/16 through 1/31/2016

Report Type Original Amendment

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.

Daniel Gielchinsky
(Type name) Treasurer Deputy Treasurer

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

Daniel Gielchinsky
(Type name) Candidate

X
Signature

X
Signature

**PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES**



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name Daniel Gelchinsky (2) I.D. Number 45
 (3) Report Name Campaign Treasurers Report (4) Cover Period 1/1/2016 through 1/31/2016
 (5) Report Type Original Amendment (6) Page 1 of 1

(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	(10) Name of Organization Employed By (if not directly hired by campaign)	(11) Amendment Type
	<u>none</u>			

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: 45

OFFICE USE ONLY

TOWN OF SURFSIDE

FEB18'16 10:23AM

(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 2 / 01 / 16 To 2 / 12 / 16 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 0 . 0

In-Kind \$ _____ , _____ , 1,050 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 1,329.00

Transfers to Office Account \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 1,329.00

(8) Other Distributions

\$ _____ , _____ , 0 . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 8,010 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 4,971 . 20

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number 45

(3) Cover Period 2 / 01 / 16 through 2 / 12 / 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
2 / 2 / 16 1 / /	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	B	PR	INK	campaign PR		\$300.00
2 / 8 / 16 2 / /	Levine & CO. Creative Television, Inc. 1360 97th Street Bay Harbor, FL 33154	B	film	INK	video		\$750.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number 45

(3) Cover Period 2 / 01 / 16 through 2 / 12 / 16

(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					
2 / 2 / 16 1	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	public relations	CAN		\$1,300.00
2 / 9 / 16 2	Squarespace, Inc. 459 Broadway Fifth Floor New York, NY 10013	website / domain	ECC		\$12.00
2 / 9 / 16 3	Citibank 9525 Harding Ave Surfside, FL 33154	account service fee	CAN		\$17.00
///					
///					
///					
///					
///					

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name

Daniel Gelchinsky

I.D. Number

45

Address (number and street)

1177 Kane Concourse, #302

City, State, Zip Code

Bay Harbor Islands, FL 33154

CHECK IF ADDRESS HAS CHANGED

TOWN OF SURFSIDE

FEB18'16 10:24AM

Candidate for:

Mayor

Commissioner, District Surfside

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name Campaign Workers report Cover Period 2/1/16 through 2/12/16

Report Type Original Amendment

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.

Daniel Gelchinsky

(Type name)

Treasurer

Deputy Treasurer

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

Daniel Gelchinsky

(Type name)

Candidate

X

Signature

X

Signature

**PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES**



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name David Gelchinsky (2) I.D. Number 45

(3) Report Name Company hasuers report (4) Cover Period 2/1/16 through 2/12/16

(5) Report Type Original Amendment (6) Page 1 of 1

(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	(10) Name of Organization Employed By (if not directly hired by campaign)	(11) Amendment Type

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: 45



(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 2 / 13 / 16 To 2 / 26 / 16 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 760 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 253.04

Transfers to Office Account \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 253.04

(8) Other Distributions

\$ _____ , _____ , 0 . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 8 , 770 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 5 , 224 . 24

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X
Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number 45

(3) Cover Period 2 / 13 / 16 through 2 / 26 / 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
2 17 / 16	Yankie Andrusier 150 Camden Dr Bal Harbour FL, 33154	I	businessman	RCT			\$100
1							
2 19 / 16	Eric Stein 1820 NE 163 Street Suite 100 North Miami Beach, FL 33162	I	attorney	RCT			\$260
2							
2 22 / 16	Max Benoliel 9421 West Broadview Drive Bay Harbor Islands, FL 33154	I	businessman	RCT			\$100
3							
2 25 / 16	Irwin Tauber 9551 East Bay Harbor Drive Bay Harbor Islands, FL 33154	I	businessman	CHE			\$300
4							
/ /							
/ /							
/ /							
/ /							

received

3/2/2016 JKN

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number⁴⁵ _____

(3) Cover Period 2 / 13 / 16 through 2 / 26 / 16

(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
2 / 19 / 16	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	lawn signs			
1			CAN		\$225.00
2 / 17 / 16	Stripe 3180 18th St San Francisco, CA 94110	processing fee			
2			CAN		\$6.20
2 / 19 / 16	Stripe 3180 18th St San Francisco, CA 94110	processing fee			
3			CAN		\$15.64
2 / 22 / 16	Stripe 3180 18th St San Francisco, CA 94110	processing fee			
			CAN		\$6.20
/ /					
/ /					
/ /					
/ /					
/ /					



MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name

Daniel Gelchinsky

I.D. Number

45

Address (number and street)

1177 Kane Concourse, Suite 302

City, State, Zip Code

Bay Harbor Islands, FL 33154

CHECK IF ADDRESS HAS CHANGED

received
3/2/2016 JRM

Candidate for:

Mayor

Commissioner, District Southside

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name campaign treasurer's report Cover Period 2/13/16 through 2/26/16

Report Type Original Amendment

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.

Daniel Gelchinsky

(Type name) Treasurer Deputy Treasurer

X

Signature

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

Daniel Gelchinsky

(Type name) Candidate

X

Signature

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



This report must be filed by applicable candidates running for Town of Surfside Mayor or Town Commissioner.

(1) Name Daniel Grelchinsky (2) I.D. Number 45
 (3) Report Name Campaign Transfers Act (4) Cover Period 2/13/16 through 2/26/16
 (5) Report Type Original Amendment (6) Page 1 of 1

(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	(10) Name of Organization Employed By (if not directly hired by campaign)	(11) Amendment Type
/				

received
3/2/2016 JLN

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Daniel Gielchinsky

Name

(2) 1177 Kane Concourse, Suite 302

Address (number and street)

Bay Harbor Islands, FL 33154

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

MAR11'16 12:12PM

TOWN OF SURFSIDE

(3) ID Number: 45

(4) Check appropriate box(es):

Candidate Office Sought: commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 2 / 27 / 16 To 3 / 10 / 16 Report Type: 4 days prior

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 3,184 . 40

Transfers to Office Account \$, , 0 . 0

Total Monetary \$, , .

(8) Other Distributions

\$, , 0 . 0

(9) TOTAL Monetary Contributions To Date

\$, , 8,770 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 8,408 . 64

(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) Daniel Gielchinsky

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
Signature

(Type name) Daniel Gielchinsky

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Daniel Gielchinsky (2) I.D. Number 45

(3) Cover Period 2 / 27 / 16 through 3 / 10 / 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /	None						
/ /							
/ /							
/ /							
/ /							
/ /							

TOWN OF SUDBURY
MARRIAGE DEPARTMENT

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number⁴⁵ _____

(3) Cover Period 2 / 27 / 16 through 3 / 10 / 16

(4) Page 1 of 3

(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					
3 / 2 / 16	Facebook 1601 S. California Ave. Palo Alto CA 94304	facebook promotion			\$116.58
1					
3 / 3 / 16	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	consulting and PR	CAN		\$1,450
2					
3 / 3 / 16	Lead Public Relations, Inc. 5245 NW 36th Street, Suite 200 Miami Springs, FL 33166	mailing costs	CAN		\$250
3					
3 / 4 / 16	OfficeMax 1255 Biscayne Blvd North Miami, FL	supplies	CAN		\$90.98
4					
3 / 7 / 16	OfficeMax 1255 Biscayne Blvd North Miami, FL	copies	CAN		\$29.94
5					
3 / 8 / 16	Miureld Aleman 3801 SW 60 Terrace Davie, FL 33314	campaign walker	CAN		\$290
6					
3 / 8 / 16	Laudelino Garcia 222 W. 42nd Street Hialeah FL 33012	campaign walker	CAN		\$290
7					
3 / 8 / 16	Dara Rose 239 NE 79th Street Miami FL 33138	campaign walker	CAN		\$160
8					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number 45

(3) Cover Period 2 / 27 / 16 through 3 / 10 / 16

(4) Page 2 of 3

(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					
3 / 8 / 16 9	Keith London 613 Oleander Drive Hallandale Beach, FL 33009	lunch reimbursement campaign walkers	CAN		\$50
3 / 8 / 16 10	Citibank 9525 Harding Ave Surfside, FL 33154	account service fee	CAN		\$17
3 / 8 / 16 11	Squarespace, Inc. 459 Broadway Fifth Floor New York, NY 10013	website / domain	ECC		\$12
3 / 10 / 16 12	Facebook 1601 S. California Ave. Palo Alto CA 94304	facebook promotion	ECC		pending
3 / 10 / 16 13	Catalina Borges 9117 Carlyle Avenue Surfside Fl 33154	campaign walker	CAN		\$36
3 / 10 / 16 14	Tali Peretz 9449 Bay Dr Surfside Fl 33154	campaign walker	CAN		\$63
3 / 10 / 16 15	Toby Squire 368 W 47th Street Miami Beach Fl 33140	campaign walker	CAN		\$81
3 / 10 / 16 16	Samuel Womble 3200 Collins Avenue Miami Beach Fl 33140	campaign walker	CAN		\$103.50

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky

(2) I.D. Number ⁴⁵ _____

(3) Cover Period ² / ²⁷ / ¹⁶ through ³ / ¹⁰ / ¹⁶

(4) Page ³ of ³

(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					
3 / 10 / 16	Noah Hickey 9250 Bay Drive Surfside Fl 33154	campaign walker			
17			CAN		\$144
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT
PAID CAMPAIGN WORKERS PARTICIPATING
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name Daniel Gelchinsky

I.D. Number 45

Address (number and street) 1177 Home Concourse

City, State, Zip Code Bay Harbor Islands, FL 33154

CHECK IF ADDRESS HAS CHANGED

MAR11'16 12:12PM

TOWN OF SURFSIDE

Candidate for:

- Mayor
- Commissioner, District Surfside
- Property Appraiser
- Clerk of the Circuit Courts
- Community Council, Area _____, Sub-Area _____

REPORT IDENTIFIERS

Report Name 4 day prior campaign finances report Cover Period 2/27/16 through 3/10/16

Report Type Original Amendment

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.

Daniel Gelchinsky
(Type name) Treasurer Deputy Treasurer

[Signature]
Signature

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

Daniel Gelchinsky
(Type name) Candidate

[Signature]
Signature

