APPOINTMENT OF CAMPAIGN TREASURE AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES			RER							ч.Л	
(Section 10							01-22-	-18811:	05 RCVD		
(PLEASE PF	RINT OR T	YPE)					*				
NOTE: This form must b officer before opening the			ifying						OFFICE	USE ONL	Y.
1. CHECK APPROPRIATE			_			_			0.5		
Initial Filing of Form		ng to Change:			rer/Deputy		Deposito		Office	Par	τy
2. Name of Candidate (in the second s	nis order: F	irst, Middle, La	ast)		Address ( de)	(includ	le post offic	e box or s	treet, city,	state, zip	
Daniel Edward Dietch					372 Byro	n Av	enue				
4. Telephone	5. E-mail a	ddress			urfside, F						
(305) 298-6568	ded4@co	ornell.edu									
6. Office sought (include d	strict, circu	iit, group numb	er)				lidate for a	a <u>nonparti</u>	<u>san</u> office	, check if	
Mayor					ар	plical		is to run as	s a Write-Ir	n candidate	
8. If a candidate for a part	san office	, check block	and fill	in na	me of pai	rty as	applicable	: My inte	ent is to rur	n as a	
Write-In No F	Party Affiliat	tion						Pa	rty cano	lidate.	
9. I have appointed the fol	lowing per	rson to act as	my		Campaigr	n Trea	surer 🔀	Deput	y Treasure	r	
10. Name of Treasurer or D	eputy Trea	surer									
Daniel Dietch											-
11. Mailing Address								12. Telep	ohone		
9372 Byron Avenue						an internet of the state of the state of the			298-65	68	_
13. City	14. Cou	-	15. Sta		16. Zip C	ode		il address	L		
Surfside	Miami-I		FL		33154		ded4@c		Contraction of the second		_
18. I have designated the	following I	bank as my	L		rimary De	posito	ry 🗋	Seconda	ry Deposit	ory	
19. Name of Bank				20. Address							
Citibank		0.0		9525 Harding Avenue       23. State       24. Zip Code			odo	_			
21. City Surfside		2. County			FL	State		2	33154	oue	
				5 500							
UNDER PENALTIES OF PERJUI DESI	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		-		26. Signature of Candidate							
January 21, 2018				X alt							
27. Treasure	r's Accept	tance of Appo	intmen	t (fill ir	n the blank	ks and	check the	appropriat	e block)		
l,		aniel Dietch Print or Type N	lame)				, do he	reby accep	ot the appo	intment	
designated above as:		Campaign T		r	Dep	outy Tr	easurer.				
January 21	2018		X	6	2						
January 21	and the second se		~	Signa	ature of C	ampai	gn Treasur	er or Depu	ity Treasur	er	-
DS-DE 9 (Rev. 10/10)									Rule 1S-2	.0001, F.A.	C.

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES (Section 106.021(1), F.S.) (PLEASE PRINT OR TYPE)					01-22	2-18411	:05 RCV	D SYN			
NOTE: This form must b officer before opening the			lifying						OFFICI	E USE	ONLY
1. CHECK APPROPRIATE											
Initial Filing of Form	-	filing to Change:	Пт	reasu	irer/De	eputy	Deposito	ry 🗌	Office		Party
2. Name of Candidate (in t	his order	: First, Middle, La	ast)			ess (includ	le post offic	e box or s	treet, city,	state, a	zip
Daniel Edward Dietch				1	ode) 372 F	Byron Ave	enue				
4. Telephone	5. E-ma	il address				le, FL 33					
(305) 298-6568	ded4@	cornell.edu									
6. Office sought (include d	istrict, cir	rcuit, group numb	per)		1		lidate for a	nonparti	san office	e, chec	k if
Mayor						applicat		is to run a	s a Write-I	n cand	idate.
8. If a candidate for a part	isan offi	ce, check block	and fil	l in na	ame o	f party as	applicable	: My inte	ent is to ru	n as a	
	Party Affi							Pa	rty can	didate.	
9. I have appointed the fo	llowing	person to act as	s my	X	Cam	paign Trea	surer	Deput	y Treasure	ər	
10. Name of Treasurer or D	eputy Tr	easurer									
Michelle D'Antuono											
11. Mailing Address								12. Teler			
8842 Froude Avenue									772-57	05	
13. City		ounty	15. St	ate	1	Zip Code		il address	~~~~~		
Surfside		ni-Dade	FL		331		michelbi				
18. I have designated the	followin	g bank as my	L			y Deposito	ry 🗋	Seconda	ry Deposi	lory	
19. Name of Bank				20. Address							
Citibank		00 0		9525 Harding Avenue 23. State 24. Zip Code							
21. City Surfside		22. County Miami-Dade				23. State FL			33154	1000	
and the second										EASUP	
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				26.	Signat	ture of Can	ndidate			2	v.
January 21, 2018											
27. Treasure		eptance of Appo		nt (fill i	in the	blanks and	I check the	appropriat	te block)		
l,		chelle D'Antuc se Print or Type					, do he	reby accep	ot the appo	ointmer	nt
designated above as:		_		ər		Deputy Tre	easurer.				
January 21	, 2018	×	X	feldler Dau							
Date	Э			Signature of Campaign Treasurer or Deputy Treasurer							
DS-DE 9 (Rev. 10/10)									Rule 1S-2	2.0001,	F.A.C.

## STATEMENT OF CANDIDATE

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

#### OFFICE USE ONLY

01-22-18A11:05 RCVD

 Image: system of the system

DS-DE 84 (05/11)



#### TOWN OF SURFSIDE

MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154

01-31-18A09:18 RCVD

#### **GENERAL ELECTION – MARCH 20, 2018**

#### 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 <u>DANCE DIERTH</u>, 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 <u>9572 Mar Market Surfside</u>, fit 25157, my occupation is <u>EMMANMANN (or Surfside</u>, fit 25157); that I have been a resident of the Town of Surfside since <u>Market</u>; that I will be at least twenty-one (21) years of age by February 5, 2018 and that if elected, I will willingly serve as <u>Market</u> (Mayor or Commissioner) of the Town of Surfside, if elected.

60.		town they \$1,2012
Signati	ure of Candidate	Date
Sworn to and subscribed before me this $31^{2}$ day of	January Goog Dina	2018.
(Notary Seal) Notary Public State of Florida Elora Riera My Commission GG 064348 Expires 08/28/2019	FIOYA BILL	UBLIC
******************	PRINTED NAME O	OF NOTARY

CANDIDATE OATH -	
NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate)	
Check box <b>only</b> if you are seeking to qualify as a write-in candidate:	01-31-18A09:18 RCVD
Write-in candidate	
1	OFFICE USE ONLY
Candida	ate Oath
	a), Florida Statutes)
, DANIEL DIETUH	
(Print name above as you wish it to appear on the ballot. hyphen, check box □. (See page 2 - Compound Last N Although a write-in candidate's name is not printed on the p	If your last name consists of two or more names but has no lames). No change can be made after the end of qualifying. ballot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office of	Malon.
	(Office) (District #)
; I am a qualified elector of	MIMII - DAOE County, Florida;
(Circuit #) (Group or Seat #)	
have qualified for no other public office in the state, the term of I seek; and I have resigned from any office from which I am re and I will support the Constitution of the United States and the <b>Candidate's Florida Voter Registration Number</b> (located on yo	equired to resign pursuant to Section 99.012, Florida Statutes; Constitution of the State of Florida. ur voter information card): <u>のりたむちちゅ</u>
Phonetic spelling for audio ballot: Print name phonetically of ballot as may be used by persons with disabilities (see instruction	n the line below as you wish it to be pronounced on the audio is on page 2 of this form): <i>[Not applicable to write-in candidates.]</i>
X and (302) 299 656 Signature of Candidate Telephone Number	Email Address
4372 BYREN WENNE SURFSIDE Address City	FL 33154 State, ZIP Code
STATE OF FLORIDA	State ZIP Code
COUNTY OF UIANI-DADE	Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me this 3134	South Public State of Florida
day of <u>analy</u> , 2018.	Elora Riera My Commission GG 064348
Personally Known: or Produced Identification:	ζ *or μo Expires 06/28/2019
. ype of Identification Produced:	
DS-DE 302NP (Rev. 11/17)	Rule 1S-2.0001, F.A.C.

FORM 1		STATEM	IENT OF		2017	
Please print or type your name, mailing address, agency name, and position be		FINANCIAL		5	FOR OFFICE USE ONLY:	
LAST NAME – FIRST NAME – MI Dietch Daniel Edward	DDLE N	AME :				
MAILING ADDRESS : 9372 Byron Avenue			-			
CITY : Surfside	3	2IP: COUNTY: 3154 Miami-I	Dade			
NAME OF AGENCY : Town of Surfside	8	· .				
NAME OF OFFICE OR POSITION Mayor	HELD O	R SOUGHT :	. 0	12-01-1	8A11:02 RCVD	
You are not limited to the space on t CHECK ONLY IF M CANDIDA						
**** BO	TH P/	ARTS OF THIS SEC	TION MUST BE CO	MPLET	ED ****	
DISCLOSURE PERIOD: THIS STATEMENT REFLECTS Y YEAR OR ON A FISCAL YEAR. EITHER (must check one):	OUR FI	NANCIAL INTERESTS FOR	THE PRECEDING TAX YEA	R, WHETI	HER BASED ON A CALENDAR	
DECEMBER 31	, 2017		FY TAX YEAR IF OTHER TH	IAN THE C	ALENDAR YEAR:	
MANNER OF CALCULATING FILERS HAVE THE OPTION OF CALCULATIONS, OR USING CO for further details). CHECK THE	USING F	REPORTING THRESHOLDS TIVE THRESHOLDS, WHICH	ARE USUALLY BASED OF	LAR VALL	IES, WHICH REQUIRES FEWER NTAGE VALUES (see instructions	
		ENTAGE) THRESHOLDS		AR VALU	JE THRESHOLDS	
PART A PRIMARY SOURCES O (If you have nothing to			the reporting person - See ins	tructions]		
NAME OF SOURCE OF INCOME			URCE'S DRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY		
Jacobs CH2M		3150 SW 38 Avenue,	Suite 700	Enviro	ironmental Consultant	
		Miami, FL 33146				
					· · · · · · · · · · · · · · · · · · ·	
PART B SECONDARY SOURCI [Major customers, clien (If you have nothing to	ts, and ot	her sources of income to busine	sses owned by the reporting p	erson - See	instructions]	
NAME OF BUSINESS ENTITY		ME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
N/A	N/A		N/A		N/A 🖿	
_						
PART C REAL PROPERTY [Lan (If you have nothing to			on - See instructions]		G INSTRUCTIONS for when here to file this form are	
Home - 9372 Byron Avenue, Surfside, FL 33154			+		ed at the bottom of page 2. RUCTIONS on who must file	
					orm and how to fill it out on page 3.	

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc See instructions] (If you have nothing to report, write "none" or "n/a") TYPE OF INTANGIBLE BUSINESS ENTITY TO WHICH THE PROPERTY RELATES					
Bank Accounts	Citibank, PO		onio, TX 78245-9013		
HELOC	Coconut Grove Bank, 2701 South Bayshore Drive, Miami, FL 33133				
PART E — LIABILITIES [Major debts - See instruction (If you have nothing to report, write "non	s]				
NAME OF CREDITOR	ADDRESS OF CREDITOR				
Sallie Mae/Navient	PO Box 9533, Wilkes-Barre, PA 18773-9533				
Freedom Mortgage	Freedom Mortgage PO Box 619063, Dallas, TX 75261-9063				
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions] (If you have nothing to report, write "none" or "n/a") BUSINESS ENTITY # 1 BUSINESS ENTITY # 2					
NAME OF BUSINESS ENTITY	18	N/A			
ADDRESS OF BUSINESS ENTITY		N/A	N/A		
PRINCIPAL BUSINESS ACTIVITY		N/A	N/A		
POSITION HELD WITH ENTITY		N/A	N/A		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		N/A	N/A		
NATURE OF MY OWNERSHIP INTEREST		N/A	N/A		
PART G — TRAINING For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S. I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.					
IF ANY OF PARTS A THROUGH G ARE	<b>CONTINUED</b>	ON A SEPARATE SHE	ET. PLEASE CHECK HERE		
IF ANY OF PARTS A THROUGH G ARE SIGNATURE OF FILE					
IF ANY OF PARTS A THROUGH G ARE SIGNATURE OF FILE Signature:		CPA or ATTO	DRNEY SIGNATURE ONLY puntant licensed under Chapter 473, or attorney he Florida Bar prepared this form for you, he or following statement:		
SIGNATURE OF FILE Signature:		CPA or ATTO If a certified public accor in good standing with th she must complete the I, Form 1 in accordance w	DRNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the CE with Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the		
SIGNATURE OF FILE Signature:		CPA or ATTO If a certified public according good standing with the she must complete the I,	DRNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the CE with Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the e and correct.		
SIGNATURE OF FILE Signature:		CPA or ATTO If a certified public acco in good standing with th she must complete the I,	DRNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the CE with Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the e and correct.		
SIGNATURE OF FILE Signature: Date Signed: February 1, 2018		CPA or ATTO If a certified public according good standing with the she must complete the I,	DRNEY SIGNATURE ONLY ountant licensed under Chapter 473, or attorney the Florida Bar prepared this form for you, he or following statement: , prepared the CE with Section 112.3145, Florida Statutes, and the Upon my reasonable knowledge and belief, the a and correct.		
SIGNATURE OF FILE Signature: Date Signed: February 1, 2018 FILING INSTRUCTIONS: If you were mailed the form by the Commission on Eff Supervisor of Elections for your annual disclosure form to that location. To determine what category you under, see page 3 of instructions. Local officers/employees file with the Supervise of the county in which they permanently reside. permanently reside in Florida, file with the Supervise	thics or a County filing, return the our position falls sor of Elections (If you do not or of the county	CPA or ATTO     If a certified public acco in good standing with th she must complete the     I,	DRNEY SIGNATURE ONLY         ountant licensed under Chapter 473, or attorney         be Florida Bar prepared this form for you, he or         following statement:		
SIGNATURE OF FILE Signature: Date Signed: February 1, 2018 FILING INSTRUCTIONS: If you were mailed the form by the Commission on Eff Supervisor of Elections for your annual disclosure form to that location. To determine what category you under, see page 3 of instructions. Local officers/employees file with the Superviso of the county in which they permanently reside.	thics or a County filing, return the our position falls sor of Elections (If you do not or of the county ers who file with ail. Contact your email address to Ethics, it will be ho file with the	CPA or ATTO If a certified public acco in good standing with th she must complete the I,	DRNEY SIGNATURE ONLY         ountant licensed under Chapter 473, or attorney         be Florida Bar prepared this form for you, he or         following statement:		

CE FORM 1 - Effective: January 1, 2018. Incorporated by reference in Rule 34-8.202(1), F.A.C.

#### PART D - INTANGIBLE PERSONAL PROPERTY (CONTINUED)

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
IRA	BHK Investment Advisors, LLC, 2200 Lakeshore Drive, Suite 250, Birmingham, AL 35209
Partnership	Napa Valley Investments LLC. 80 SW 8 <sup>th</sup> Street, Suite 2250, Miami, FL 33130
Limited Partnership	Kayne Anderson Real Estate Debt II, L.P., c/o Kayne Anderson Capital Advisors, L.P.,1800 Avenue of the Stars, 3rd Floor, Los Angeles, California 90067

#### PART E - LIABILITIES (CONTINUED)

NAME OF CREDITOR	ADDRESS OF CREDITOR
Ford Credit	PO Box 54200, Omaha, NE 68154
Lexus Financial Services	P.O. Box 2991 Torrance, CA 90501

### NOMINATING PETITION FOR MAYOR OR COMMISSIONER

# TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the To	own of Surfside, Florida, hereby nominate _	Daniel Dietch		for
the office of <u>Mayor</u> 2018.	(Mayor or Commissioner) at a	an election to be held on	March 20	0,

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. 1

provide the second seco	
Signature: Barbara Chan	Date:8Voters Reg. #
Print Name: BARBURH CoHEN	Address:
Signature: Com Alalin	Date: 1 22/18 Voters Reg. #
Print Name: LEUIS A. COHEN	Address
Signature: Norothy Melie	Date: 1/22/18 Voters Reg. #
Print Name: Dorothvark Keber	Address:
Signature: 7 BARBARA MCLAUGHLIN M	Date: Voters Reg. #
Print Names Burbara V. M. Lauffin V	Address:
Signature: _ Coractor forga	Date: 1/-23/14 Voters Reg. #
Print Name: NOR IN A SO 10051	Addres
Signature:	Date:/23/18 Voters Reg, #
Print Name: SADIA ARGON	Address:
Signature:	Date: 1/23/18 Voters Reg #
Print Name: RAYMING J. P. Dilis	Addres
Signature: 10m Stranship	Date: 123-18 Voters Reg. #
Print Name: TONI STRANS TY	Address
Signature: Karn Schneller	Date: [-23.26 / & Voters Reg. #
Print Name: KARON Schwarden	Address:
Signature:	Date: 1/23/18 Voters Reg. #
Print Name: Migoel Feamedez	Address:
Signature: Keopples Ladreg	Date: 1/23/15 Voters Reg. #
Print Name: Leopoldg E. LADAEA	Address:
Signature:	Date: 123110 Voters Reg. #
Print Name: EVELYNE CHICHE	Address:
Signature:	Date: 1-25 - 18 Voters Reg. #
Print Name: FREIDY CINEKE	Address:
STATEMENT	OF CIRCULATOR
The undersigned is the circulator of the foregoing paper cont	
was made in my presence and is the genuine signature of the	o poroan whose news it is a lot of signature appended thereto

the person whose name it purports to be.
Signature of Circulator: <u>Barbara</u> <u>Ghar</u> Address of Circulator: <u>9341</u> <u>Glinis</u> <u>Arz</u> , <u># 1008</u> <u>Surfaids</u> <u>33159</u>
Address of Circulator: 9341 Collins Arz, # 1008 Surficide 33154
Email address of Circulator: louber 1008 of gmail, Com
ACCEPTANCE OF NOMINATION
I hereby accept the nomination of <u>Mayor</u> (Mayor or Commissioner) and agree to
Signature of Candidate:

Date: JANAKY 23,2018

### NOMINATING PETITION FOR MAYOR OR COMMISSIONER

### TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate the office of <u>Mayor</u> (Mayor or Commissioner) at an election to be held on <u>March 20</u>, 2018.

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:	Date: Journey 22 Wis Voters Reg. #
Print Name: DAWIELDIETLY	Address:
Signature:	Date: 1-22-18 Voters Reg. #
Print Name: Benlamin Dietch	Address:
Signature:	Date: 1.221 X Voters Reg. #
Print Name: Dahra Kuluin	Address:
Signature:	Date: 127 17 Voters Reg. #
Print Name: REAEN GLUNN	Address:
Signature:	Date: 1/27/18 Voters Reg. #
Print Name: GABRIEL GENDLER	Address:
Signature:	Date: 1-27-19 Voters Reg. #
Print Name: RILANNU De ARMA	Address
Signature: Karp Soc	Date: 1-2.7 - 1/2 Voters Reg. #
Print Name: Katen Stiller	Address:
Signature:	Date: 12016 Voters Reg. #
Print Name:	Address:
Signature:	Date: 1 28/12 Voters Reg. #
Print Name: Spiel Losa	Address:
Signature: Aharra Cehen	Date: 1/28/18 Voters Reg. #
Print Name: Sharona Cehen	Address:
Signature:	Date: _//2_8//8 Voters Reg. #
Print Name: _/DARLS CONCA	Address:
Signature:	Date: Voters Reg. #
Print Name: M. STURP B BARKER	Address:
Signature:	Date: 1/28/2018Voters Reg. #
Print Name TARONDAZ-LEZL	Address:
STATEMENT	OF CIRCULATOR
The undersigned is the circulator of the foregoing paper co	ntaining <u>3</u> signatures. Each signature appended thereto
was made in my presence and is the genuine signature of t	he person whose name it purports to be.
Signature of Circulator:	

Address of Circulator: 9372, BIRLA MENUE SMRIDE A 33154	
Email address of Circulator: dieth 4 may . (up	
ACCEPTANCE OF NOMINATION	
I hereby accept the nomination of <u>Mayor</u>	_ (Mayor or Commissioner) and agree to
Signature of Candidate:	Date: JANNALY 28,2018

### NOMINATING PETITION FOR MAYOR OR COMMISSIONER

### TOWN OF SURFSIDE, FLORIDA 01-31-18A09:22 RCVD

We the undersigned electors of the Town of Surfs	side, Florida, hereby nomina	ate Daniel Dietch	for		
the office of <u>Mayor</u>		at an election to be held on	March 20,		
2018.					
This petition must be filed with the Town Clerk not m	ore than fifty-five and not less	than thirty five days prior to the e	lection.		
- ( A A A A A A A A A A A A A A A A A A					
Signature:	Date: 1271	Voters Reg. #			
Print Name: DONG M. Hedditch	Address:	Stand Stand			
Signature:	Date: 1271	8 Voters Reg. #	~		
Print Name: DUY ton Heddeltch	Address:				
Signature:	Date: 1/77	LIX Voters Reg. #			
Print Name: Nicole Travis	Address	Cumberly Antel	.2		
Signature:	Date: 1/27/11	Voters Reg. #			
Print Name: Loper	Address:	Con-hat - North			
Signature:	Date: 1/28/	Voters Reg. #	2.57		
Print Name: Ph/ DURI CODEZ	Address:	Carl Carl Carl			
Signature:	Date: _// 28/	18 Voters Reg. #			
Print Name: Michido A. Lohez	Address:	and			
Signature:	Date: 01.28.	18 Voters Reg. #			
Print Name: Aberon Balkany	Address:				
Signature: Analla Balkary	Date: 1/28	/It Voters Reg. #			
Print Name: CHAYA BALKANY	Address:	Cartine Hieron			
Signature:	Date: 1/28/1	P Voters Reg. #			
Print Name: Mitcher II KINZER	Address:	Cardula Area			
Signature:	Date: 78	Voters Reg. #			
Print Name: KRISTER JONES	Address:	190 911	ŝ.		
Signature: Ba	Date: 1281	Voters Reg. #			
Print Name: BENLANUN ACOWARID	Address:	- 90 - Carrow			
Signature:	Date:	Voters Reg. #			
Print Name:	Address:				
Signature:	Date:	Voters Reg. #			
Print Name:	Address:				
STATEME	NT OF CIRCULATOR				
The undersigned is the circulator of the foregoing paper	containing    signa	tures. Each signature append	ed thereto		
was made in my presence and is the genuine signature		it purports to be.			
Signature of Circulator:	North.				
Address of Circulator: 8867 Carlyle Avenue Sufficle FL 33154					
Email address of Circulator: SONIG 1988 ditt	ADL.COM				
	NCE OF NOMINATION		1		
I hereby accept the nomination of Mayor		(Mayor or Commissioner) and	agree to		

Signature of Candidate: \_\_\_\_\_\_ Date: JAN UN4 Shi Dite

### NOMINATING PETITION FOR MAYOR OR COMMISSIONER

### TOWN OF SURFSIDE, FLORIDA01-31-18A09:22 RCVD

We the	undersigned of	electors of the Town of Surfs	side, Florida, hereby nominate	Daniel Dietch	for
the office of	Mayor		_ (Mayor or Commissioner) at		March 20.
2018.			_ , ,		11101 011 20,

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:	poo.	Date:	\\ 248\\ 14 Voters Reg. #
Print Name:	MARIADEL C. DANON	Address:	
Signature:		Date:	1 28 11 Voters Reg. #
Print Name:	LAZARA CAVRO	Address	
Signature:	Bosangela Hacket	+ Date:	01/28/18 Voters Reg. #
Print Name:	Margela, Kockett	Addres	
Signature:	Jourge farente	Date:	01 28 18 Voters Reg. #
Print Name:	Rosentaky KARUKIN	Address:	
Signature:	and his	Date:	01 29 18 Voters Reg. #
Print Name:	Abruhum Fried	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:	
Signature:		Date:	Voters Reg. #
Print Name:		Address:	2
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 <u>5</u> 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:	
Address of Circulator:GITZ BYEN ANONNE SURRIVE (PLIZING	
Email address of Circulator: dietchy mayor e consilien	
ACCEPTANCE OF NOMINATION	
I hereby accept the nomination of <u>Mayor</u>	(Mayor or Commissioner) and agree to
Signature of Candidate:	Date: JANWY 31, 2016

-	242 mm	73%	222		
NUE WATERMARK	<u>311</u>		Security Frances Details on Under	84	
2016 2016 2016 2016 2016 2016 2016 2016	60 			h	Ţ
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NT UP TO THE LIGHT	OILIPEをおゆのの55 FA# 004 020-03 CK。 SCT。# DAVID DIFOR (AMANGN)	****TWENTY-FIVE		D FOR MORE te Penn's Way 19720	
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#### **DECLARATION AND FIRST AMENDMENT WAIVER** FOR CANDIDATES WHO AGREE TO COMPLY WITH THE *VOLUNTARY* STATEMENT OF FAIR CAMPAIGN PRACTICES

#### AN EXPLANATION REGARDING YOUR RIGHTS

Section 2-11.1.1(D)(2) of the Code of Miami-Dade County, Florida, provides that any candidate for public office in Miami-Dade County may at any time *voluntarily* declare that he or she agrees to abide by the *voluntary* Statement of Fair Campaign Practices. In agreeing to abide by the *voluntary* Statement of Fair Campaign Practices, as compulsory, the authority of the Miami-Dade County Commission on Ethics and Public Trust to decide whether the candidate has violated the *voluntary* Statement of Fair Campaign Practices and, if so, to impose the appropriate penalty, if any.

Before agreeing to abide by the *voluntary* Statement of Fair Campaign Practices, you should carefully read the *voluntary* Statement of Fair Campaign Practices included with this DECLARATION AND FIRST AMENDMENT WAIVER as well as the following information regarding your rights.

The Statement of Fair Campaign Practices is *voluntary*. You are under no obligation to agree to the *voluntary* Statement of Fair Campaign Practices. If you decide not to agree to the *voluntary* Statement of Fair Campaign Practices, you may still run for elective office in Miami-Dade County if you are qualified. There is NO PENALTY if you decide not to sign the *voluntary* Statement of Fair Campaign Practices.

If you decide to agree to the *voluntary* Statement of Fair Campaign Practices, you should know that you will be WAIVING YOUR FIRST AMENDMENT RIGHTS TO FREE SPEECH because certain speech prohibited by the *voluntary* Statement of Campaign Practices is protected by the First Amendment to the U.S. Constitution and Article I, Section 4, of the Florida Constitution. Prior to agreeing to comply with the *voluntary* Statement of Fair Campaign Practices, you should consider consulting an attorney to ensure that you understand the consequences of signing the DECLARATION AND FIRST AMENDMENT WAIVER.

Before signing this DECLARATION AND FIRST AMENDMENT WAIVER, you have the right to request and receive from the Ethics Commission an advisory opinion as to whether your planned campaign activities (*e.g.*, campaign advertisement or statements) are likely to violate the *voluntary* Statement of Fair Campaign Practices. In the event that you sign the DECLARATION AND FIRST AMENDMENT WAIVER, you will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that you may be considering.

A determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER shall not be construed by Miami-Dade County or the Ethics Commission to mean that the candidate is unethical in any way. Further, a determination by a candidate not to execute the DECLARATION AND FIRST AMENDMENT WAIVER should not be construed by any candidate or any other person or entity to mean that the candidate is unethical in any way.

#### INSTRUCTIONS

The DECLARATION AND FIRST AMENDMENT WAIVER, which includes the *voluntary* Statement of Fair Campaign Practices, can be found on page 2 of this form. If you are a candidate for county office and agree to abide by the *voluntary* Statement of Fair Campaign Practices, please sign the DECLARATION AND FIRST AMENDMENT WAIVER and file with the Miami-Dade Commission on Ethics and the Miami-Dade Elections Department. If you are a candidate for municipal office and agree to abide by the *voluntary* Statement of Fair Campaign Practices, please sign and file with the Miami-Dade Commission on Ethics and your respective municipal clerk. For further information, contact the Miami-Dade Office of Governmental Affairs at 305 499-8410.

Miami-Dade Commission on Ethics 19 W. Flagler St., Suite 820 Miami, FL 33130 Miami-Dade Elections Department

2700 NW 87<sup>th</sup> Ave. *or* P.O. Box 521550 Doral, FL 33172 Miami, FL 33152-1550



#### DECLARATION AND FIRST AMENDMENT WAIVER

FOR CANDIDATES WHO AGREE TO COMPLY WITH THE **VOLUNTARY** STATEMENT OF FAIR CAMPAIGN PRACTICES

#### **VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES**

As a candidate for public office in Miami-Dade County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore,

- I. I shall not make my race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
- 2. I shall not make my opponent's race, religion, national origin, gender, physical disability, or sexual orientation an issue in my campaign.
- 3. I will condemn any appeal to prejudice based on race, creed, national origin, religion, gender, physical disability, or sexual orientation.
- 4. I shall not, without just cause, attack or question my opponent's patriotism.
- 5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement.
- 6. I shall not tolerate my supporters engaging in these activities that I condemn, nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group that resorts to the methods and tactics I condemn.
- 7. I shall run a positive campaign emphasizing my qualifications for office and positions on issues of public concern.
- 8. I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
- 9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting that person's credibility.
- 10. I will take personal responsibility for approving or disavowing the substance of attacks on my opponent that may come from third parties supporting my candidacy.
- 11. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

#### BY SIGNING THIS DECLARATION AND FIRST AMENDMENT WAIVER, I AGREE TO

- ABIDE BY THE VOLUNTARY STATEMENT OF FAIR CAMPAIGN PRACTICES,
- SUBMIT TO THE COMPULSORY JURISDICTION OF THE ETHICS COMMISSION, AND
- WAIVE MY FIRST AMENDMENT RIGHTS.

I,	UNNIA DIETCH			, a candidate for the office of	
	please print your name				
	MAYON	in	TOUN	OF SUMBIDE	_,
	elective office sought			county, municipality, or other jurisdiction	

agree to abide by the *voluntary* Statement of Fair Campaign Practices as provided in Section 2-11.1.1(D)(1) of the Code of Miami-Dade County, Florida, and to recognize as compulsory the jurisdiction of the Ethics Commission. I further agree that the Ethics Commission will have the authority to decide whether I have violated the voluntary Statement of Fair Campaign Practices and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any, which may include an admonition or public reprimand. I recognize that I have the right before signing this DECLARATION AND FIRST AMENDMENT WAIVER to consult my own legal counsel and to request and receive from the Ethics Commission an advisory opinion as to whether my planned campaign activities are likely to violate the voluntary Statement of Fair Campaign Practices. I also recognize that after signing this agreement, I will continue to have the right to request and receive from the Ethics Commission an advisory opinion regarding any future campaign activities that I may be considering. I hereby proclaim (1) that my agreement to abide by the Statement of Fair Campaign Practices is voluntary, knowing, and intelligent; (2) that I have not been forced, pressured, or otherwise coerced into making this agreement; and (3) that I am aware of the voluntary nature of this agreement. I recognize that there is no penalty for refusing to agree to abide by the *voluntary* Statement of Fair Campaign Practices. I also recognize that in signing this agreement, I will be forfeiting rights to which I would otherwise be entitled under the First Amendment to the U.S. Constitution and Article I, Section 4, of the Constitution of the State of Florida. Once the DECLARATION AND FIRST AMENDMENT WAIVER is signed, it is deemed irrevocable for the duration of the campaign.

Signature

2 of 2



Elections 2700 NW 87th Avenue Miami, Florida 33172 T 305-499-8683 F 305-499-8547 TTY 305-499-8480

miamidade.gov

February 5, 2018

Sandra Novoa, MMC Town Clerk Town of Surfside 9293 Harding Ave Surfside, FL 33154

Dear Ms. Novoa:

The Miami-Dade Elections Department has completed the verification of the petitions for Daniel Dietch, a candidate for the office of Mayor for Town of Surfside. A total of 25 petitions were reviewed for verification; of which 25 were certified.

For purposes of signature verification, my office follows the directives given by the municipality. You are encouraged to ensure compliance with municipal charter or code requirements.

Please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Michelle McClain, Deputy Supervisor of Elections for Voter Services at 305-499-8302.

Sincerely,

Christina White Supervisor of Elections

Enclosure (1)



MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra Novoa, MMC, Town Clerk

February 6, 2018

Mr. Daniel Dietch 9372 Byron Avenue Surfside, Fl 33154

Dear Mr. Dietch,

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 the Mayor for the Town of Surfside. Your name will be placed on the ballot for the March 20, 2018 Municipal Election.

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

truly yours, voa, MMC Sand Tov

CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1) Daniel Dietch	OFFICE USE ONLY
Name	
(2) 9372 Byron Avenue Address (number and street)	02-12-18P04:48 RCVD
Surfside, FL 33154	Jek -
City, State, Zip Code	
Check here if address has changed	(3) ID Number:
(4) Check appropriate box(es):	
Candidate Office Sought: Mayor	
<ul> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> </ul>	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
	01 / 31 / 18 Report Type: January 2018
	ecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
	Monetary
Cash & Checks \$,, 0.00	Expenditures \$,, 65 . 00
Loans \$,, <u>100</u> .00	Transfers to Office Account \$ , , 0.00
Total Monetary \$,, 100 . 00	
In-Kind \$,,0.00	Total Monetary \$ , , , 65 . 00
	(8) Other Distributions
	\$,,000
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$,, 100 . 00	\$, <u></u> , <u>65</u> . <u>00</u>
	tification
	on to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, corr	
(Type name) Michelle D'Antuono	(Type name) Daniel Dietch
☐ Individual (only for IE	Candidate Chairperson (only for PC and PTY)
× Gualder D'Att	× Stron
Signature	Signature

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS

#### **CAMPAIGN TREASURER'S REPORT -- ITEMIZED CONTRIBUTIONS**

(1)	) Name	Danie	l Dietch			(2)	) I.D. Number		
(3)	) Cover	Period	/ /	throu	gh /	<sup>31</sup> / <sup>18</sup>	_ (4) Page	1	of
	(5) Date (6) Sequen Numbe	ce	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	С	(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
01 1	26 /	18 /	Dietch, Daniel 9372 Byron Avenue Surfside, FL 331564	I	Consultant	LOA			\$100.00
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	1	1							
	1	1							
	1	1							
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DS-DE 13 (Rev. 11/13)

#### **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1	Name	Daniel	Dietch	

l Dietch		2) I.D. Number	·	<u> </u>	
(3) Cover Period $\frac{01}{\sqrt{01}}$ $\frac{18}{\sqrt{18}}$ through $\frac{01}{\sqrt{31}}$ $\frac{18}{\sqrt{18}}$ (4) Page $\frac{1}{\sqrt{16}}$ of $\frac{1}{\sqrt{16}}$					
(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	
Town of Surfside 9293 Harding Avenue Surfside, FL 33154	Qualifying Fee	MON	N/A	\$25.00	
Miami Dade Elections Department Public Services 2700 NW 87th Avenue Miami, Florida 33172	Voter Data	MON	N/A	\$40.00	
	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Town of Surfside 9293 Harding Avenue Surfside, FL 33154 Miami Dade Elections Department Public Services 2700 NW 87th Avenue	d       01       / 18       through       01       / 31       / 18       (4         (7)       (8)       Purpose       (add office sought if contribution to a candidate)         (Last, Suffix, First, Middle)       Street Address & City, State, Zip Code       Qualifying Fee         Town of Surfside       9293 Harding Avenue       Qualifying Fee         Surfside, FL 33154       Voter Data         Miami Dade Elections Department       Voter Data	d       01       / 18       through       01       / 31       / 18       (4) Page       1         (7)       (8)       (9)         Full Name       (add office sought if contribution to a candidate)       (9)         Street Address & City, State, Zip Code       (add office sought if contribution to a candidate)       Expenditure Type         Town of Surfside       9293 Harding Avenue       Qualifying Fee       MON         Surfside, FL 33154       Voter Data       MON       MON	d       01       / 18       through       01       / 31       / 18       (4) Page       1       of         (7)       (8)       (9)       (10)         Full Name       Purpose       (ad office sought if       Expenditure       Full Name         (Last, Suffix, First, Middle)       Street Address &       City, State, Zlp Code       Contribution to a       Expenditure       Amendment         Town of Surfside       Qualifying Fee       Qualifying Fee       N/A       N/A         Miami Dade Elections Department       Voter Data       N/A       N/A	

DS-DE 14 (Rev. 11/13)

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY				
	OFFICE USE ONLY			
Name	1 A A A A A A A A A A A A A A A A A A A			
Daniel Dietch				
I.D. Number				
Address (number and street) 9372 Byron Avenue	02-12-18P04:48 RCVD			
City, State, Zip Code	Jul .			
Surfside, FL 33154				
CHECK IF ADDRESS HAS CHANGED				
Candidate for:				
🛛 Mayor				
Commissioner, District	_			
Property Appraiser				
Clerk of the Circuit Courts				
Community Council, Area, Su	b-Area			
REPORT IDE	NTIFIERS			
Report Name January 2018 Cover Period	through <u>01/01/18</u> through <u>01/31/18</u>			
Report Type 😡 Original 🛛 Amendment				
CERTIF	ICATION			
It is a first degree misdemeanor for any pers	on 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.	I certify that I have examined this report and it is true, correct, and complete.			
Michelle D'Antuono	Daniel Dietch			
(Type name) Treasurer Deputy Treasurer	(Type name) 🛛 Candidate			
X Multu D'att Signature	X Alance			

#### 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 <u>Daniel Dietch</u> (2) I.D. Number					
(3) Report	Name January 2018	(4) Cover Period	(4) Cover Period 01/01/18 through 01/31/1		
(5) Report	Type 🖾 Original 🛛 Amendment	(6) Page1_	of1		
(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	
N/A	N/A	N/A	N/A	N/A	
		· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·			
				·	

CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Daniel Dietch	OFFICE USE ONLY					
Name						
(2) 9372 Byron Avenue Address (number and street)						
Surfside, FL 33154	02-22-17P03902-ARVD					
City, State, Zip Code						
Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es):						
Candidate Office Sought: Mayor Political Committee (PC)	1 1990-1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 -					
Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded					
Party Executive Committee (PTY)     Independent Expenditure (IE) (also covers an	Check here if PTY has disbanded Check here if no other IE or EC reports will be filed					
individual making electioneering communications)						
(5) Report	Identifiers					
Cover Period: From 02 / 01 / 18 To	02 / 16 / 18 Report Type: 25 Days Prior to General					
✓ Original	cial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$,, 550 . 00	Monetary Expenditures \$,, 0.00					
Loans \$,, <u>0</u> . 00	Transfers to Office Account \$ , , 0.00					
Total Monetary \$,, 650 . 00						
In-Kind \$,, 0.00	Total Monetary \$ , , , , 65 . 00					
	(8) Other Distributions					
	\$,,					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$,,,00	\$,,,00					
(11) Ceri						
It is a first degree misdemeanor for any pers						
I certify that I have examined this report and it is true, corr						
(Type name) Michelle D'Antuono	(Type name) Daniel Dietch					
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)					
× fuclele Deleu	x ala					
Signature	Signature					

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS

(1) Name Daniel Dietch 02-22-18A10:14 RCVD (2) LD Number								
	) Name	02 01 18	throu	02	<b></b> (2)	I.D. Number (4) Page	1	of
	(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
	(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	С	ontributor	Contribution Type	In-kind Description	Amendment	Amount
02	06 18 / /	Cohen, Barbara 9431 Collins Avenue, #1008 Surfside, FL 33154	I	Retired	CHE			\$200.00
02 2	16 1 <sup>8</sup>	Dietch, Joshua 51 Landseer Street West Roxbury, MA 02132	I	Consultant	CHE			\$100.00
02 3	/ <sup>16</sup> / <sup>18</sup>	Myers, Douglas 955 Massachusetts Avenue, #342 Cambridge, MA 02139	I	Retired	CHE			\$250.00
	1 1							
	1 1							
	1 1							
	1 1							
DS	DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							

02-22-18A10:14

R

### **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Daniel Dietch (2) I.D. Number								
(3) Cover Perio	Cover Period $\frac{02}{2}$ / $\frac{01}{18}$ through $\frac{02}{2}$ / $\frac{16}{18}$ (4) Page $\frac{1}{2}$ of $\frac{1}{2}$							
(5) Date (6) Sequence Number	(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			
N/A / /	N/A	N/A	N/A	N/A	N/A			
_ / _/	•							
_/_/								
11				4				
_ / /								
_/ /								

DS-DE 14 (Rev. 11/13)

T						
MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY						
	OFFICE USE ONLY					
Name						
Daniel Dietch						
I.D. Number						
	( <i>N</i> _)					
Address (number and street)	( )					
9372 Byron Avenue	02-22-18A10:14 RCVD					
City, State, Zip Code						
Surfside, FL 33154						
CHECK IF ADDRESS HAS CHANGED						
Candidate for:						
X Mayor						
Commissioner, District						
	_					
Property Appraiser						
Clerk of the Circuit Courts						
Community Council, Area, Su	b-Area					
REPORT IDE	NTIFIERS					
Report Name 25 Days Prior to General Cover Period	d <u>02/01/18</u> through <u>02/16/18</u>					
Report Type 😡 Original 🛛 Amendment						
CERTIF	ICATION					
It is a first degree misdemeanor for any pers	son 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.	I certify that I have examined this report and it is true, correct, and complete.					
Michelle D'Antuono	Daniel Dietch					
(Type name) Treasurer Deputy Treasurer	(Type name) Candidate					
X Jucieu D'atto- Signature	X A 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 Dietch 02-22-18A10:14 RCVD	(2) I.D. Numbe	er
(3) Report Name 25 Days Prior to General (4) Cover Period 02/01/18	through	02/16/18
(5) Report Type 🛛 Original 🔲 Amendment (6) Page1	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
N/A	N/A	N/A	N/A	N/A
4.			5	
		7.		
		· · · · · · · · · · · · · · · · · · ·		
r:				

CAMPAIGN TREASURE	R'S REPORT SUMMARY				
(1) Daniel Dietch	OFFICE USE ONLY				
Name					
(2) 9372 Byron Avenue Address (number and street)	03-09-18A09:37 RCVD				
Surfside, FL 33154					
City, State, Zip Code					
Check here if address has changed	(3) ID Number:				
(4) Check appropriate box(es):					
<ul> <li>✓ Candidate Office Sought:</li> <li>Mayor</li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>					
(5) Report	Identifiers				
Cover Period: From <u>02</u> / <u>01</u> / <u>18</u> To	02 / 16 / 18 Report Type: <sup>25 Days Price to General</sup>				
Original      Amendment     Spe	ecial Election Report				
(6) Contributions This Report	(7) Expenditures This Report				
Cash & Checks \$,, 550 . 00	Monetary Expenditures \$,, 0.00				
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, 0.00				
Total Monetary       \$	Total Monetary \$,,,				
, <u>, , , , , , , , , , , , , , , , , , </u>	(8) Other Distributions				
	\$,,				
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
\$,,,	\$,,,,				
(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, corr	ect, and complete:				
(Type name) Michelle D'Antuono	(Type name) Daniel Dietch				
☐ Individual (only for IE	Candidate Chairperson (only for PC and PTY)				
x flictler Ditt	X Cre-C				
Signature	Signature				

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Daniel Dietch	OFFICE USE ONLY						
Name							
(2) 9372 Byron Avenue Address (number and street)	03-09-18A09:37 RCVD						
Surfside, FL 33154							
City, State, Zip Code							
Check here if address has changed	(3) ID Number:						
(4) Check appropriate box(es):							
Candidate Office Sought: IVIAYOI Office Sought: Of							
Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
<ul> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an</li> </ul>	Check here if PTY has disbanded Check here if no other IE or EC reports will be filed						
individual making electioneering communications)	-						
(5) Report Identifiers							
Cover Period: From <u>02</u> / <u>17</u> / <u>18</u> To	03 / 02 / 18 Report Type: 11 Days Prior to General						
☑ Original	cial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, <u>8</u> , <u>296</u> . <u>00</u>	Monetary Expenditures \$, <u>7</u> , <u>018</u> . <u>38</u>						
Loans \$,, 0.00	Transfers to Office Account \$ , , 0.00						
Total Monetary \$, <u>8</u> , <u>296</u> . <u>00</u>							
In-Kind \$,, 000	Total Monetary \$, _7, 018 . 38						
	(8) Other Distributions						
	\$,,0 00						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,8_,94600	\$,7_,08338						
(11) Cert							
	on to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, corr							
(Type name) Michelle D'Antuono	(Type name) Daniel Dietch						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
× fliceller Date	x al						
Signature	Signature						

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS

#### **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name (2) I.D. Number							
(3) Cover Period	02 / <u>17</u> / <u>18</u>	throu	gh /	<sup>02</sup> / <sup>18</sup>	_ (4) Page	1 0	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	С	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
02 20 18 / / 1	Yarkin, Ray Ellen 9401 Collins Avenue, #607 Surfside, FL 33154	I	Museum Trust	CHE			\$1,000.00
02 / <sup>20</sup> / <sup>18</sup> 2	Yarkin, Allan 9401 Collins Avenue, #607 Surfside, FL 33154	I	Wealth Manag	CHE			\$1,000.00
02 / 20 / 18 3	Peck, Michael 101 Main Street Chester, CT 06412	I		CHE			\$50.00
02 / 20 / 18 4	Gaffin, Hal 60 Edgewater Drive, Lanai North Coral Gables, FL 33133	I		CHE			\$100.00
02 20 18 / / 5	Cypen, Steve 975 Arthur Godfrey Road, Suite 500 Miami Beach, FL 33140	в	Law Firm	CHE			\$1,000.00
02 20 18 / / 6	Peck, Paul 311 East 11th Street, Unit 6B New York City, NY 10003	I	Event Planne				\$250.00
02 21 18 / / 7	Stuzin, Charles 800 Douglas Road, Suite 500 Coral Gables, FL 33134	в	Bank	СНЕ			\$250.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

03-09-18A09:37 RCVD

#### **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

		_ L
141	Name	
(1)	Name	
		_

Daniel Dietch

(2) I.D. Number

						······	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						5
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
02 21 18	Gilbert, Arthur 13637 Deering Bay Drive, #282						
8		I		CHE			\$100.00
			τ.				
02 , 21 , 18	Jacobs, Richard 6246 SW 99th Terrace						
9	Miami, FL 33156	I		CHE			\$100.00
02 21 18	Sirkin, Ed 8881 SW 78th Place						
	Miami, FL 33156	I		CHE			\$100.00
	Dietch, Loretta						
02 21 18	7647 Southampton Drive, #408						
11	Tamarac, FL 33321	I		CHE			\$100.00
02 22 18	Kulvin, Stephen 13611 Deering Bay						
12	Drive, #202 Coral Gables, FL 33158	I	Retired	CHE			\$500.00
02 22 18	Schneider, Sheldon 4082 Battersea Road						
1 1	Miami, FL 33133	I	Retired	CHE			\$200.00
13							
02 25 18	Gassman, Leigh						
1 1	8325 SW 143rd Street Miami, FL 33158	-	Realtor	CHE		2	\$150.00
14		I	RealLOI				

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

92: 8907-A78169PAIN

#### **CAMPAIGN TREASURER'S REPORT -- ITEMIZED CONTRIBUTIONS**

(1)	Name	el Dietch	(2) I.D. Number					
(3)	Cover Period	<b>1</b> <u>02</u> / <u>17</u> / <u>18</u>	. throu	gh/	02 / 18	_ (4) Page	3	of
02	(5) Date (6) Sequence Number 26 18 / /	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Peck, A. Susan 101 Main Street Chester, CT 06412	C Type I	(8) ontributor Occupation	(9) Contribution Type CHE	(10) In-kind Description	(11) Amendment	(12) Amount \$100.00
02 16	26 18 / /	Mahler, Ed 7480 SW 156th Street Palmetto Bay, FL 33157	I	Retired	СНЕ			\$200.00
02 17	28 18	Hinds, Miriam 10 Edgewater Drive, Lanai South Miami, FL 33133	I	Retired	CHE			\$200.00
02 18	28 18 / /	Dietch, Jared 329 Platbush Avenue, #1 New York City, NY 11217	I		CHE			\$50.00
02 19	28 18 //	Schlesser, Mel 1300 Collins Avenue Miami Beach, FL 33139	в	Developer	CAS	•		\$500.00
02 20	28 18 / /	Scherr, Louis 8875 Hawthorne Avenue Surfside, FL 33154	I		CAS			\$10.00
02 21	28 18 / /	Oppenheimer, Martin 9424 Bay Drive Surfside, FL 33154	I		CAS			\$100.00

DS-DE 13 (Rev. 11/13)

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#### **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1)	Name	l Dietch			(2)	I.D. Number		
(3)	Cover Period	02 / <sup>17</sup> / <sup>18</sup>	. throu	gh /	<sup>02</sup> / <sup>18</sup>	_ (4) Page	4	of
5	(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Са Туре	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
03	01 18 / /	Glynn, Peter 9940 NW 79th Avenue Hialeah Gardens, FL 33016	в	Manufacturer	CHE			\$200.00
03 23	/ 01 / 18	Yarkin, Genna 1575 Jade Street #262 Davis, CA 95616	I	Lawyer	CHE			\$1,000.00
03 24	/ 01 / 18	London, Keith 613 Oleander Drive Hallandale Beach, FL 33009	I		CAS			\$36.00
02 25	/ 20 18	Yarkin, Sophie 9401 Collins Avenue, #607 Surfside, FL 33154	I	Administrati	CHE			\$1,000.00
	1 1							
	1 1						e.	
	1 1							

DS-DE 13 (Rev. 11/13)

#### **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(	1	) Name	Daniel	Dietch

(1) Name Danie	1 Dietch		z) I.D. Number			
(3) Cover Period $\frac{02}{2}$ / $\frac{17}{8}$ through $\frac{03}{2}$ / $\frac{18}{18}$ (4) Page $\frac{1}{100}$ of $\frac{1}{100}$						
(5) Date (6) Sequence Number	(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	
02 /20 / 18 1	Go Daddy 14455 N. Hayden Road, Suite 219 Scottødale, AZ 85260	E-mail Address	MON		\$4.99	
<sup>02</sup> / <sup>28</sup> / <sup>18</sup> 2	Nationbuilder 520 S. Grand Avenue, 2nd Floor Los Angeles, CA 90071	Donation Transaction Fee	Mon		\$18.59	
<sup>03</sup> / <sup>01</sup> / <sup>18</sup> 3	COMPDEALINGS 2040 NE 163rd Street, #210 North Miami Beach, FL 33162	Signs and Stickers	MON		\$816.80	
03 02 18 4	MDW Communications LLC 333 Los Olas Way, CU#1 Fort Lauderdale, FL 33301	Direct Mail Consulting	MON		\$4,178.00	
<sup>03</sup> / <sup>02</sup> / <sup>18</sup> 5	Blueprint Consulting LLC 936 SW 1st Avenue, Suite #980 Miami, FL 33130	Campaign Consulting	MON		\$2,000.00	
	-					

DS-DE 14 (Rev. 11/13)

#### SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

03-09-18A09:38 RCVD

PAID CAMPAIGN WOR	LECTIONS DEPARTMENT RKERS PARTICIPATING TACTIVITIES SUMMARY						
	OFFICE USE ONLY						
Name							
Daniel Dietch							
I.D. Number							
Address (number and street)							
9372 Byron Avenue	03-09-18A09:39 RCVD						
City, State, Zip Code							
Surfside, FL 33154							
CHECK IF ADDRESS HAS CHANGED							
Candidate for:          Image: Mayor         Image: Commissioner, District							
Property Appraiser							
Clerk of the Circuit Courts							
Community Council, Area, Su	ıb-Area						
REPORT IDENTIFIERS							
Report Name 11 Days Prior to General Cover Period	Report Name 11 Days Prior to General Cover Period 02/17/18 through 03/02/18						
Report Type 🖾 Original 🛛 Amendment							
CERTIF	ICATION						
It is a first degree misdemeanor for any pers	son to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true,	I certify that I have examined this report and it is true,						
correct, and complete.	correct, and complete.						
Michelle D'Antuono	Daniel Dietch						
(Type name) I Treasurer Deputy Treasurer	(Type name) X Candidate						
X flictelle Dictet	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 Dietch	·	(2) I.D. Number
(3) Report Name <u>11 Days Prior to General</u>	(4) Cover Period 02/17/18	through03/02/18
(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
N/A	N/A	N/A	N/A	N/A
	· · · · · · · · · · · · · · · · · · ·			
	·			
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			

CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Daniel Dietch	OFFICE USE ONLY					
Name						
(2) 9372 Byron Avenue Address (number and street)	03-16-18A09:48 RCVD . pt					
Surfside, FL 33154	05-10-10003-40 8014					
City, State, Zip Code						
Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es):						
<ul> <li>✓ Candidate Office Sought: Mayor</li> <li>Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>						
(5) Report	Identifiers					
Cover Period: From <u>03</u> / <u>03</u> / <u>18</u> To	03 / 15 / 18 Report Type: 4 Days Prior to General					
☑ Original	cial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$,, <u>125</u> 00	Monetary Expenditures \$ , , <u>669</u> . <u>53</u>					
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,000					
Total Monetary       \$	Total Monetary \$ , , 669 . 53					
m-Rind	(8) Other Distributions					
	\$, <u>0</u> 00					
(9) TOTAL Monetary Contributions To Date \$,9_,07100_	(10) TOTAL Monetary Expenditures To Date \$,7_,75291					
(11) Cert	ification					
It is a first degree misdemeanor for any pers						
I certify that I have examined this report and it is true, corr	ect, and complete:					
(Type name) Michelle D'Antuono	(Type name) Daniel Dietch					
☐ Individual (only for IE	✓ Candidate					
X JUCIULU DUUT	X Signature					

#### **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	l Dietch			(2)	I.D. Number		
(3) Cover Period	<sup>03</sup> / <sup>03</sup> / <sup>18</sup>	throu	gh / _	<sup>15</sup> / <sup>18</sup>	_ (4) Page	1	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8) pontributor	(9) Contribution	(10) In-kind	(11)	(12)
Number 03 12 18 / / 1	City, State, Zip Code Stowe, Kenneth P.O. Box 011723 Miami, FL 33101	Туре 1	Occupation	СНЕ	Description	Amendment	Amount \$100.00
03 13 18 2	D'Antuono, Michelle 8842 Froude Avenue Surfside, FL 33154	I		CHE			\$25.00
1							
<u> </u>							
<u> </u>							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Daniel Dietch
------------------------

(2) I.D. Number

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
3 /03 / 18 1	amazon.com PO Box 81226 Seattle, WA 98108	Thank You Notes	мон		\$42.26
<sup>3</sup> 05 18 2	Nationbuilder 520 S. Grand Avenue, 2nd Floor Los Angeles, CA 90071	Donation Transaction Fee	MON		\$1.34
<sup>3</sup> 07 18 3	COMPDEALINGS 2040 NE 163rd Street, #210 North Miami Beach, FL 33162	Shirts	MON		\$624.90
<sup>3</sup> / <sup>13</sup> / <sup>18</sup> 4	Nationbuilder 520 S. Grand Avenue, 2nd Floor Los Angeles, CA 90071	Donation Transaction Fee	MON		\$1.03
/ /					

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY					
	OFFICE USE ONLY				
Name Daniel Dietch					
I.D. Number					
	03-16-18A09:49 H(V)				
Address (number and street) 9372 Byron Avenue	pt				
City State 7in Oads	_				
City, State, Zip Code					
Surfside, FL 33154					
CHECK IF ADDRESS HAS CHANGED					
Candidate for:					
🖾 Mayor					
Commissioner, District	_				
□ Property Appraiser					
Clerk of the Circuit Courts					
Community Council, Area, Su	b-Area				
REPORT IDE	NTIFIERS				
Report Name 4 Days Prior to General Cover Period	through <u>03/03/18</u> through <u>03/15/18</u>				
Report Type 🛛 Original 🛛 Amendment					
CERTIF	ICATION				
	son 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.	I certify that I have examined this report and it is true, correct, and complete.				
Michelle D'Antuono	Daniel Dietch				
(Type name) 🛛 Treasurer 🗌 Deputy Treasurer	(Type name) 🛛 🖾 Candidate				
X flicelet Data Signature	X Accordination 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 <u>Daniel Dietch</u>		_ (2) I.D. Number	
(3) Report Name <u>4 Days Prior to General</u>	(4) Cover Period03/03/18	through03/15/18	
(5) Report Type I Original Amendmen	(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
N/A	N/A	N/A	N/A	N/A
-				
				6
			03-16-18A09:49 RCVD	
6				
			т.	
	9°			

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) Daniel Dietch	OFFICE USE ONLY					
Name						
(2) 9372 Byron Avenue Address (number and street)						
Surfside, FL 33154	06-15-18A09:06 RCVD					
City, State, Zip Code						
Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es): ✓ Candidate Office Sought: Mayor						
✓ Candidate       Office Sought:       INPLY OF         ☐ 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 <u>03</u> / <u>03</u> / <u>18</u> To	03 / 15 / 18 Report Type: 4 Days Prior to General					
Original Amendment Spe	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$,, <u>125</u> .00	Monetary Expenditures \$,, 689 . 53					
Loans \$,, <u>0 00</u>	Transfers to Office Account \$, 0.00					
Total Monetary \$, <u>125_00</u>	Total Monetary \$,, 689 . 53					
In-Kind \$,, 0.00						
	(8) Other Distributions \$,,,					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$,,	\$,7_,77291					
	tification on to falsify a public record (ss. 839.13, F.S.)					
I certify that I have examined this report and it is true, corr						
(Type name) Michelle D'Antuono	(Type name) Daniel Dietch					
☐ Individual (only for IE or electioneering comm.)	Candidate Chairperson (only for PC and PTY)					
× fliceeer Dat	x Anna					
Signature	Signature					

(1) Name Danie	CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name Daniel Dietch (2) I.D. Number								
(3) Cover Perio	d <u><sup>03</sup> / <sup>03</sup> / <sup>18</sup></u> through <u><sup>03</sup></u>	/ 15 / 18 (	4) Page	of	1				
(5) Date (6) Sequence Number	(7) Fuil 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				
03 /15 / 18 5	City National Bank 15 West Flagler Street Mimai, FL 33130	Bank Fees	MON	ADD	\$20.00				
_/ /									
· / /									
_ / _									
_ / /									
//									
//									

CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1) Daniel Dietch	OFFICE USE ONLY
(2) 9372 Byron Avenue Address (number and street)	06-15-18A09:07 RCVD
Surfside, FL 33154	00-19-18A09:07 RCVD
City, State, Zip Code	
Check here if address has changed	(3) ID Number:
(4) Check appropriate box(es):	
Candidate Office Sought: Mayor	
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
	Identifiers       03     /     02     /     18     Report Type: 11 Days Prior to General
· · · · · · · · · · · · · · · · · · ·	
	ecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$, <u>8</u> , <u>296</u> . <u>00</u>	Monetary Expenditures \$, <u>7</u> , <u>018</u> . <u>38</u>
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , 0.00
Total Monetary \$, <u>8</u> _, <u>296</u> <u>00</u>	Total Monetary \$ , 7 , 018 . 38
In-Kind \$ , , 0 . 00	· · · · · · · · · · · · · · · · · · ·
	(8) Other Distributions
	\$,, 00
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$,8_,94600	\$, <u>7</u> , <u>083</u> . <u>38</u>
(11) Cer	l tification
	ion to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, cor	rect, and complete:
<sub>(Type name)</sub> Michelle D'Antuono	(Type name) Daniel Dietch
☐ Individual (only for IE	Candidate Chairperson (only for PC and PTY)
× fucille Dave	x ale
Signature	Signature

# **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	l Dietch			(2	) I.D. Number		
(3) Cover Period	<sup>02</sup> / <sup>17</sup> / <sup>18</sup>	_ throu	gh /	02 / 18	_ (4) Page	1	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	С	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
02 28 18 / / 19	Schlesser, Mel 1300 Collins Avenue Miami Beach, FL 33139	в	Developer	CAS		DEL	\$500.00
02 28 18 / /	Schlesser, Mel 1300 Collins Avenue Miami Beach, FL 33139	в	Developer	СНЕ		ADD	\$500.00
02 28 18 / / 18 20	Scherr, Louis 8875 Hawthorne Avenue Surfside, FL 33154	I		CAS		DEL	\$10.00
02 28 18 / / 20	Scherr, Louis 8875 Hawthorne Avenue Surfside, FL 33154	I		СНЕ		ADD	\$10.00
02 28 18 / / 21	Oppenheimer, Martin 9424 Bay Drive Surfside, FL 33154	I		CAS		DEL	\$100.00
02 28 18 / / 21	Oppenheimer, Martin 9424 Bay Drive Surfside, FL 33154	I		CHE		ADD	\$100.00
03 01 18 / / 24	London, Keith 613 Oleander Drive Hallandale Beach, FL 33009	I		CAS		DEL	\$36.00

DS-DE 13 (Rev. 11/13)

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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Danie	l Dietch			(2)	) I.D. Number		
(3) Cover P	Period	02 / <u>17</u> / <u>18</u>	throu	gh /	<sup>02</sup> / <sup>18</sup>	_ (4) Page	2	of
(5) Date (6) Sequence Number		(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	С	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
03 01 / /	18	London, Keith 613 Oleander Drive Hallandale Beach, FL 33009	I		CHE		ADD	\$36.00
				- -				
/								

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) Daniel Dietch	OFFICE USE ONLY				
Name					
(2) 9372 Byron Avenue Address (number and street)	06-15-18A09:06 RCVD				
Surfside, FL 33154					
City, State, Zip Code					
Check here if address has changed	(3) ID Number:				
(4) Check appropriate box(es):					
<ul> <li>✓ Candidate Office Sought: Mayor</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> </ul>	Check here if PC or ECO has disbanded Check here if PTY has disbanded				
Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed				
individual making electioneering communications)					
(5) Report	Identifiers				
Cover Period: From 03 / 15 / 18 To	06 / 18 / 18 Report Type: 90 Days After				
✓ Original	ecial Election Report				
(6) Contributions This Report	(7) Expenditures This Report				
Cash & Checks \$,,,000	Monetary Expenditures \$, _1 , 298 . 09				
Loans \$,, <u>0</u> .00	Transfers to Office Account \$ , , 0.00				
Total Monetary \$,, 0.00	Total Monetary \$, 1 , 298 . 09				
In-Kind \$,, 000					
	(8) Other Distributions \$,, 000				
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
\$,,	\$, <u>9</u> , <u>071</u> . <u>00</u>				
(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) Michelle D'Antuono (Type name) Daniel Dietch					
Individual (only for IE Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY) or electioneering comm.)					
× Juellen X ala					
Signature	Signature				

# **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name (2) I.D. Number						
(3) Cover Period	<sup>03</sup> / <sup>15</sup> / <sup>18</sup>	through /	<sup>18</sup> / <u>18</u>	_ (4) Page	1	of
(5) Date (6) Sequence Number	(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) Amcunt
1 1						
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1 1						
1 1						
1 1						

DS-DE 13 (Rev. 11/13)

# **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Danie	l Dietch		2) I.D. Number		
(3) Cover Period $\frac{03}{15}$ / $\frac{15}{18}$ through $\frac{06}{18}$ / $\frac{18}{18}$ (4) Page $\frac{1}{100}$ of $\frac{2}{100}$					
(5) Date (6) Sequence Number	(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
03 /17 / 18 1	Blueprint Consulting LLC 936 SW 1st Avenue, Suite #980 Miami, FL 33130	Campaign Consulting	MON		\$500.00
03 18 18 2	Blueprint Consulting LLC 936 SW 1st Avenue, Suite #980 Miami, FL 33130	Advertisement	MON		\$130.00
<sup>03</sup> <sup>19</sup> <sup>18</sup> 3	Walmart 1425 NE 163rd Street North Miami Beach, FL 33162	Election Day Cooler	MON		\$29.54
03 20 18 ///	Café Vert 9490 Harding Avenue Surfside, FL 33154	Blection Day Snacks	MON		\$66.00
<sup>03</sup> / <sup>21</sup> / <sup>18</sup> 5	amazon.com PO Box 81226 Seattle, WA 98108	Campaign Close-out	MON		\$114.37
04 04 18 6	amazon.com PO Box 81226 Seattle, WA 98108	Tent Replacement	MON		\$119.99
<sup>04</sup> / <sup>15</sup> / <sup>18</sup> 7	City National Bank 25 West Flagler Street Miami, FL 33130	Bank Fee	MON		\$20.00
<sup>05</sup> / <sup>12</sup> / <sup>18</sup> 8	Daniel Dietch 9372 Byron Avenue Surfside, FL 33154	Loan Repayment	RMB		\$100.00

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name Daniel Dietch (2) I.D. Number					
(3) Cover Peric	d / _15 / _18 through _06		4) Page	of	2
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
05 <b>/</b> 15 <b>/</b> 18 9	City National Bank 25 West Flagler Street Miami, FL 33130	Bank Fee	MON		\$20.00
<sup>06</sup> / <sup>14</sup> / <sup>18</sup> 10	Town of Surfside 9293 Harding Avenue Surfside, FL 33154	Donation	DIS		\$198.19
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY					
	OFF	ICE USE ONLY			
Name					
Daniel Dietch					
I.D. Number					
I.D. Number					
Address (number and street)		90.75			
9372 Byron Avenue					
City, State, Zip Code					
Surfside, FL 33154					
CHECK IF ADDRESS HAS CHANGED					
		8			
Candidate for:					
🖾 Mayor					
Commissioner, District					
Property Appraiser					
Clerk of the Circuit Courts					
Community Council, Area, Su	h Area				
REPORT IDE	NTIFIERS				
REFORTIDE					
Report Name 90 Days After Cover Perio	4 02/15/19 then	ugh_06/18/18			
Cover Perio	d <u>03/15/18</u> thro	ugii 00/10/10			
Report Type 🖾 Original 🛛 Amendment					
CERTIE	ICATION				
It is a first degree misdemeanor for any per					
I certify that I have examined this report and it is true,		ned this report and it is true,			
correct, and complete.	correct, and complete.				
<i>A</i>					
Michelle D'Antuono	Daniel Dietch				
(Type name) I Treasurer Deputy Treasurer	(Type name)	Candidate			
per storte e la coltete constante en constante destablisés destates activationes estates en sectores estates en sectores estates estate					
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X guiller & luc	X an	E			
Signature	Signature	والانتكاف المراجع ومعاوم ومحتر فراعين وأمار وأمار وأمراح فما معامر ومعاملهم والمراجع والمراجع ومراجع والمراجع			
oignature	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 Dietch		(2) I.D. Number _	
(3) Report I	Name <u>90 Days After</u>	(4) Cover Period		6/18/18
(5) Report <sup>-</sup>	Type 🛛 Original 🔲 Amendment	(6) Page <u>1</u>	of1	
(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	(10) Name of Organization Employed I (if not directly hired by campaigr	(11) By Amendment ) Type
N/A	N/A	N/A	N/A	N/A
		*****		
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