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

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

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)

01-09-18P07:04 RCVD

Rule 1S-2.0001, F.A.C.

NOTE: This form must be on file with the qualifying officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
	reasurer/Deputy Depository Office Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip code)
Daniel Gelchiusky	_ code) 9511 Collins Ave, #71/
4. Telephone 5. E-mail address /	C 1 + 11 73154
(305) 7638708 Agralchinsty chuncher Gibell. gu	
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if
Conssigner	applicable: My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and fill	
Write-In No Party Affiliation	Party candidate.
g person to use use,	Campaign Treasurer Deputy Treasurer
10. Name of Treasurer or Deputy Treasurer	
11. Mailing Address	42 Talanhana
	12. Telephone
13. City 14. County 15. State	(365) 765 870 P
Bry Holas Islands Mich Dock fl	33/SY disolding & above to 1/5 (OVE
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank	20. Address
21. City 22. County	23. State 24. Zip Code
	TO CAMPAIGN TREACHDED AND
	FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND AND THAT THE FACTS STATED IN IT ARE TRUE.
25. Date	26. Signature of Candidate
1-9-2018	X
27. Treasurer's Acceptance of Appointment	(fill in the blanks and check the appropriate block)
1. Doyle Gelins	, do hereby accept the appointment
(Please Print or Type Name)	,,
designated above as: Campaign Treasurer	Deputy Treasurer.
1-9-2018 X	
	Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

01-09-18P07:04 RCVD 54N

1, Daviel Gelchinsky
candidate for the office of;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.
X Signature of Candidate 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)

NOTE: This form must be on file with the qualifying

DS-DE 9 (Rev. 10/10)

01-09-18P07:04 RCVD AND O1-16-18AC9:27 RCVD Skn.

Rule 1S-2.0001, F.A.C.

officer before opening the campaign account.	OFFICE USE ONLY
1. OHECK 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)	3. Address (include post office box or street, city, state, zip
Daniel Gelchiusky	code) 9511 Collins Ave, #711
4. Telephone 5. E-mail address /	A 100 A
(305) 7638708 dioklinsty christer Gibell.	gu Subite, fl 33154
6. Office sought (include district, circuit, group number)	7. If a candidate for a nonpartisan office, check if
Conssigner	applicable:
· · · · · · · · · · · · · · · · · · ·	My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and f	ill 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	
11. Mailing Address	12. Telephone
1135 Hone (curcuise, 311	Clooc? (305) 765 870 8
13. City 14. County 15. Si Rry Wiles Islands Mich Date fl	tate 16. Zip Code 17. E-mail address
18. I have designated the following bank as my	Primary Depository Secondary Depository
19. Name of Bank	20. Address
-1tibank	9525 Hardin, Ave.
21. City Swife 22. County Mican Dolo	23. State 24. Zip Code 33/54
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ TH DESIGNATION OF CAMPAIGN DEPOSITOR	IE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND Y AND THAT THE FACTS STATED IN IT ARE TRUE.
25. Date	26. Signature of Candidate
1-9-2018	X
27. Treasurer's Acceptance of Appointmen	t (fill in the blanks and check the appropriate block)
1. Doule Gelchins	, do hereby accept the appointment
(Please Print or Type Name)	
designated above as: Campaign Treasure	Deputy Treasurer.
1-9-2018 X	
Date	Signature of Campaign Treasurer or Deputy Treasurer

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

01-31-18P02:27 RCVD

Rule 1S-2.0001, F.A.C.

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)

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 Treasurer/Deputy (Depository Re-filing to Change: V 2. Name of Candidate (in this order: First, Middle, Last) 3. Address (include post office box or street, city, state, zip 951 Cellins Aup, #711 Suffice 4 33154 and Gelchinsky 4. Telephone (305) 7/3 8708 6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if applicable: COMMISSICHES 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 No Party Affiliation Write-In candidate. Party 9. I have appointed the following person to act as my Campaign Treasurer **Deputy Treasurer** 10. Name of Treasurer or Deputy Treasurer 12. Telephone 11. Mailing Address 1365 17638708 15. State 16. Zip Code 13. City 14. County denz 760 yahec. Cou Mer Dole Primary Depository Secondary Depository 18. I have designated the following bank as my 19. Name of Bank 20. Address 21. City Michi 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 2018 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) , do hereby accept the appointment (Please Print or Type Name) designated above as: Campaign Treasurer Deputy Treasurer. Signature of Campaign Treasurer or Deputy Treasurer



TOWN OF SURFSIDE

MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154

GENERAL ELECTION - MARCH 20, 2018

SWORN STATEMENT OF QUALIFICATIONPursuant 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 } 01-31-18P02:28 RCVD
TOWN OF SURFSIDE }
I solemnly swear (or affirm) under oath, that my name is Daniel Gellusk,
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 9811 (ollins Ave, Sested 1 33154,
my occupation is; that I have been
a resident of the Town of Surfside since; 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
(Mayor of Commissioner) of the Town of Surfside, if elected. Signature of Candidate 13/2018 Date
Sworn to and subscribed before me this 3161 day of January ,2018. Notary Public State of Florida Elora Riera My Commission GG 064348 Expires 06/28/2019 NOTARY PUBLIC
(Notary Seal) Substitution of NOTARY PRINTED NAME OF NOTARY

CANDIDATE OATH – NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

Check box only if you are seeking to qualify as a write-in candidate:

01-31-18P02:19 RCVD

Mrito in condidate	
☐ Write-in candidate	OFFICE USE ONLY
	ate Oath (a), Florida Statutes)
1, Daniel Gel	chinsky.
hyphen, check box 🔲. (See page 2 - Compound Last i	. If your last name consists of two or more names but has no Names). 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	(Office) , Substee (District #)
(Circuit #) , ; I am a qualified elector of	Mami Wate County, Florida;
have qualified for no other public office in the state, the term of	o hold the office to which I desire to be nominated or elected; I f which office or any part thereof runs concurrent with the office equired to resign pursuant to Section 99.012, Florida Statutes; Constitution of the State of Florida.
Candidate's Florida Voter Registration Number (located on you	our voter information card):
	on the line below as you wish it to be pronounced on the audions on page 2 of this form): [Not applicable to write-in candidates.]
X / 305, 763 8-	108 days 76 Ryalon com
Signature of Candidate Telephone Number Signature of Candidate City	Email Address State ZIP Code
STATE OF FLORIDA	Signature of Notary Public
COUNTY OF May Dale	Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me this 11st day of, 20 18 .	Notary Public State of Florida Elora Riera
ersonally Known: or Produced Identification:	My Commission GG 064348 Expires 06/28/2019
Type of Identification Produced:	

FORM 1		STATEMENT OF 2017			2017
Please print or type your name, mailin address, agency name, and position b	ng below:	FINANCIAL INTERESTS FOR OFFICE USE ON			FOR OFFICE USE ONLY:
MAILING ADDRESS!	LAST NAME FIRST NAME MIDDLE NAME : GELCHINSK, Danie MAILING ADDRESS				
9511 Cellins	Ave				
CITY: ()		ZIP: COUNTY			~ 7:
NAME OF AGENCY:		331sy mice	~ /	01-31	-18P02:25 RCVD
NAME OF OFFICE OR POSITION		OR COULOUT.			
Com 41					
You are not limited to the space on	the lines o	on this form. Attach additional sh			
CHECK ONLY IF CANDID	ATE OF	R NEW EMPLOYEE C	R APPOINTEE	A SAME AND A STORY	
**** BO	OTH PA	ARTS OF THIS SEC	TION MUST B	E COMPLE	TED ****
THIS STATEMENT REFLECTS	YOUR FI PLEASI	INANCIAL INTERESTS FOR E STATE BELOW WHETHER	THE PRECEDING TA R THIS STATEMENT I	AX YEAR, WHE S FOR THE PE	THER BASED ON A CALENDAR RECEDING TAX YEAR ENDING
DECEMBER 3	31, 2017	OR SPEC	IFY TAX YEAR IF OTI	HER THAN THE	CALENDAR YEAR:
MANNER OF CALCULATING FILERS HAVE THE OPTION OF CALCULATIONS, OR USING CO for further details). CHECK THE	USING FOR OMPARA	REPORTING THRESHOLDS TIVE THRESHOLDS WHICH	HARE HISHALLY BAS	E DOLLAR VA SED ON PERC	LUES, WHICH REQUIRES FEWER ENTAGE VALUES (see instructions
		ENTAGE) THRESHOLDS	OR OR	DOLLAR VAI	LUE THRESHOLDS
PART A PRIMARY SOURCES C	OF INCOM o report, v	IE [Major sources of income to write "none" or "n/a")	the reporting person -	See instructions]	
NAME OF SOURCE OF INCOME		SOURCE'S DESCRIPTION OF THE SOURCE'S ADDRESS PRINCIPAL BUSINESS ACTIVITY			
Daniel & T. Gelehnsly	DA	1135 Kune Concers	e 312 Mecr		low film
		Bay Helber	Is leads A 331	sy	
		,			
PART B SECONDARY SOURCE [Major customers, client	ES OF INC	COME ner sources of income to busines	sses owned by the repo	rting person - Se	se instructionel
(if you have nothing to	o report, v	write "none" or "n/a")	to the following by the repo	rung person - oc	ic manucionaj
NAME OF BUSINESS ENTITY		ME OF MAJOR SOURCES DF BUSINESS' INCOME	ADDRES OF SOUR		PRINCIPAL BUSINESS ACTIVITY OF SOURCE
				-	
PART C REAL PROPERTY (Land	d building	is owned by the reporting perso	n. Con instructional		
PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") FILING INSTRUCTIONS for when and where to file this form are					
9511 Collins Ave, #7//					
CCude owned + % ct (Chuch Wess this form and how to fill it out begin on page 3.			orm and how to fill it out		

		The state of the s	THE RESIDENCE OF THE PARTY OF T	
PART D — INTANGIBLE PERSONAL PROPERTY [Stead of the control of the	ocks, bonds, certificat	es of deposit, etc See in	structions]	
TYPE OF INTANGIBLE		BUSINESS ENTITY TO	WHICH THE PROPERTY RE	LATES
40K YOLK plen	Deniel Y.	Gelchinsky A	24	
529 education plans	A Lelit	y Inneshen	K	
PART E — LIABILITIES [Major debts - See instruction: (If you have nothing to report, write "non-	s] e" or "n/a")		TCF Bonk,	De K war
NAME OF CREDITOR		ADDRES	SS OF CREDITOR	
Penfed Gredet legion	Box 1432	Alexander A	- 7233	
Wells log. But	Delowore			
PART F — INTERESTS IN SPECIFIED BUSINESSES [In (If you have nothing to report, write "none" NAME OF BUSINESS ENTITY	Ownership or positio or "n/a") BUSINES		inesses - See instructions] BUSINESS EN	√TITY#2
ADDRESS OF BUSINESS ENTITY	1135 kens a	execus pry Heiser		
PRINCIPAL BUSINESS ACTIVITY	- Con to	120 /		
POSITION HELD WITH ENTITY	pies	ient		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	y	las		
NATURE OF MY OWNERSHIP INTEREST	1000/0)		
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	CONTINUED ON	A SEPARATE SHE	T, PLEASE CHECK H	IERE 🔲
SIGNATURE OF FILEI Signature:	<u>3:</u>	If a certified public according good standing with the she must complete the function of the she must complete the function of the she will be shown in accordance with the she will be shown in the she will be she	ith Section 112.3145, Florida	er 473, or attorney orm for you, he or prepared the CE Statutes, and the
Date Signed: 1/31/2018		disclosure herein is true CPA/Attorney Signature: Date Signed:		ige and belief, the
FILING INSTRUCTIONS:			医多种形式 化二甲基甲基甲基	ACT 145 146 146 146 146 146 146 146 146 146 146
If you were mailed the form by the Commission on Ethi Supervisor of Elections for your annual disclosure fil	cs or a County Ca	ndidates file this form t	ogether with their filing par	pers.
	mu. return the		JU BUUNE 371	

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: *Initially*, each local officer/employee, state officer, and specified state employee must file *within 30 days* of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2017.

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 1-31-18P02:19 RCVD

We the undersign the office of	gned electors of the Town of Surf	side, Florida, herel	by nominate _	Daniel Gelchi	las of foi
2018.		_ (Mayor or Comn	nissioner) at a	an election to be held	on March 20,
This potiti	ion must be filed with the T				
rriis peuti	on must be filed with the Town Clerk	between January 18	5, 2018 and Fe	bruary 5, 2018 (by 12:	00pm).
Signature:	U	Date:	1-18-11	Voters Reg. #	
Print Name: Rack	nel DenZlager	Address:	STATE THE	o voters reg. #	
Signature: 10	hdr	_ Date:	1-18-17	Voters Reg. #	
Print Name: RIVI	KAH LUPSKAR	Address		Voters reg. #	
Signature:		_ Date: <u>C</u>	21/21/10	Voters Reg. #_	
Print Name: Mi(Lasel · Cariolio	Address:		2 woters reg. #	
Signature:	Mary	_ Date:	1/21/1/	Voters Reg. #	
Print Name:	Shea Rubinstein	Address:		Military Constitution	
Signature:	De la	_ Date: _	1/21/12	_ Voters Reg. #	
Print Name:	paral 10501	Address			
Signature:		Date:	1/21/18	Voters Reg. #	
Print Name:	1 Zalman Lipska	Address:			
Signature: Yals	Silmore.	Date:	1/21/18	Voters Reg. #	
nt Name:	set schwortz	Address			
Signature:	W.	Date:	1/21/58	Voters Reg. #	
Print Name:	à landon	Address			
Signature:		Date:	1/2/18	Voters Reg. #	
Print Name: £1.	rinsburg	Address			
Signature:	Marjary	Date: _ //	21/18	Voters Reg.#	
Print Name:	Here Davoyon	Address:			
Signature:		Date: 1/2	74X8	Voters Reg.#	
Print Name:	Mandy DXAV35660i	Address:			
Signature:		Date: 1/2	21/18	/oters Reg. #	
Print Name:	My bishy	Address		WARREN)	
Signature:		Date: [12	1118 1	oters Reg. #	
Print Name: M.N	JISSany'	Address:			7
	STATEMEN	T OF CIRCULATO	מור		
The undersigned is the ci	irculator of the foregoing paper co			-	
was made in my presence	e and is the genuine signature of	the person whose	_ signatures. name it purpo	Each signature appearts to be	ended thereto
Signature of Circulator:	4		Traine it purpt	one to be.	
Address of Circulator:	full full la	C 1/2	/	21614	
il address of Circulator:	or: don 76 c	your com	4 H 33	,157	_
	ACCEPTANC	E OF NOMINATIO	N		
I hereby accept the nomin	lation of			or Commissioner)	nd agree to
Signature of Candidate: _			Date	1129/12	% :
	V	7		. 1 a . 11 0	

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 01-31-18P02:19 RCVD We the undersigned electors of the Town of Surfside, Florida, hereby nominate Commissione 1 (Mayor or Commissioner) at an election to be held on 02018. This petition must be filed with the Town Clerk between January 15, 2018 and February 5, 2018 (by 12:00pm). Signature: 1-191-18 Date: Voters Reg. # Print Name: Address: Signature: Date: Voters Reg. # Print Name: Address: Signature: Date: Voters Reg. # Print Name: Address: Signature: Date: Yoters Reg. # Print Name: Address: Signature: -17-18 Date: Voters Reg. # nalt Print Name: Address Signature: 1-17-18 Voters Reg. # Print Name: Address: Signature: 1-17-18 Date: Voters Reg. # int Name: Address Signature: 1-17-18 Date: Voters Reg. # Print Name: Address: Signature: 17-18 Date: Voters Reg. # Print Name: Address Signature: 1-17-10 Voters Reg. # Date: Print Name: Address: Signature: idanson Date: 1-17-18 Voters Reg. # Print Name: avison Address: Signature: 1-17-18 Voters Reg. # Date: Print Name: Address: Signature: 1-18-18 Date: Voters Reg. # Print Name: 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: **ddress of Circulator: 951 K 33154 ail address of Circulator: hoe occu ACCEPTANCE OF NOMINATION

(Mayer-or(Commissioner) and agree to

Date:

I hereby accept the nomination of

Signature of Candidate:

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 -31-18P02:19 RCVD

We the undersigned electors of the Town of Surf the office of	side, Florida, he	ereby nominate	Daniel	Gelchins	for
2018.	_ (Mayor or Co	mmissioner) a	an election to be	held on	Varch 20,
This petition must be filed with the Town Clerk	between January	v 15, 2018 and Fe	bruary 5, 2018 (b	y 12:00pm).	
Signature:		: 1/3///8			<u>-</u>
Print Name: Simbat No Miller	Address	AND DESCRIPTION OF THE PARTY OF	Voters Reg.		
Signature:	Date	and a second	Votora Bos	4 1172 01	0.10
Print Name: Dulty Barcio	Addres		Voters Reg. #	* HIZON	112
Signature: Carlos Ohason,	_ Date	7/28/11	⁸ Voters Reg. #		
Print Name: Canushay	Address		voiers Reg. #		
Signature:	_ Date:	Oner or harmon population	_ Voters Reg. #		
Print Name: Elana, Sakkya	_ Address	1/0//8	_ volers Reg. #		!
Signature: 2/10/1999	Date:	1/28/8018	Votors Pos #		
Print Name: NATHAEL KARUKIN	_ Address:	1000000	_ Voters Reg. #		
Signature:	Date:	1/28/18	Voters Reg. #	**********	*********
Print Name: Sharona Cohen	Address:	TO THE	voters rieg. #		
Signature:	Date:	11281181	Voters Reg. #		
int Name: SWABTAI S. PLUTKO	Address:		voters reg. #		
Signature: Of the	Date:	1/21/18	Voters Reg. #		
Print Name: KRO A AM SQUED	Address:	RAZ B	voters reg. #		
Signature:	Date:	1129/18	Voters Reg. #		
Print Name: Daniel Gielchius	Address:		votero reg. # _		
Signature: Rul		1.31.18	Voters Reg. #		
Print Name: Tiva ParL	Address	ABA SUC		Carrent 7	
Signature:			Voters Reg. #		
Print Name:	Address:				
Signature:	Date:	\	/oters Reg. #		*******
Print Name:	Address:				
Signature:	Date: _	\	oters Reg. #_	***************************************	
Print Name:	Address:				
STATEMEN	T OF CIRCULA	TOR			;
The undersigned is the circulator of the foregoing paper co	ontaining \	signatures.	Fach signature	annended th	eroto
was made in my presence and is the genuine signature of	the person who	se name it purp	orts to be.	appended in	ereto
Signature of Circulator:					
Address of Circulator: 951 (slips	De	S.16.6 A	1 23184		
ail address of Circulator:	vice of		- 53121		
I hereby accept the nomination of	E OF NOMINA	EUROSE SECTION		The same of the sa	
(integral Commissioner) and agree to					
Signature of Candidate:	5	Date	: 1/31	118	
	/				

COPY

Security Features Details on Back HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK 170736309 **\$25.00** DATE 01/30/18 OFFICIAL CHECK NAME OF REMITTER DANIEL GIELCHINSKY DBA

Citibank, N.A., One Penn's Way

New Castle, DE 19720

AUTHORIZED SIGNATURE \$0.00 ONL 170736309 ****TWENTY-FIVE DOLLARS*** ****TOWN OF SURFSIDE**** HOLD DOCUMENT IS TO THE TOTAL FC# 00055 FA# 003 031-02 CK. Ser.# Citibank, N.A. TO THE ORDER OF PAY

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, the candidate recognizes, 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 87th 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,	Daviel Gelch	usky	, a candidate	e for the office of
	please print your name			
	COMMISSICH F	in	Surside	FL
	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.

* /	1/31/2018
Signature	Date
COE, revised 5/2010 2 of 2	





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 Gielchinsky, a candidate for the office of Commissioner for Town of Surfside. A total of 33 petitions were reviewed for verification; of which 23 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)



Elections 2700 NW 87th Avenue

Miami, Florida 33172 T 305-499-8683 F 305-499-8547

miamidade.gov

TTY 305-499-8480

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 Gielchinsky, a candidate for the office of Commissioner for Town of Surfside. A total of 2 petitions were reviewed for verification; of which 2 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 Gielchinsky 9511 Collins Avenue, #711 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 the Town Commission 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.

Very truly yours,

Sandra Novoa, MMC

Town Clerk

	CAMPAIGN TREASURER'S REPORT SUMMARY				
(1)	Daniel Gielchinsky	OFFICE USE ONLY			
	Name				
(2)	9511 Collins Ave, #711				
	Address (number and street) Surfside, FL 33154	03.06.100			
	City, State, Zip Code	02-06-18P05:58 RCVD SKA			
	Check here if address has changed	(3) ID Number:			
(4)	Check appropriate box(es):				
	Candidate Office Sought: Commissione	er			
	☐ 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			
		01 / 31 / 18 Report Type: 2018M1			
☑ 0	Original Amendment Spe	ecial Election Report			
(6)	Contributions This Report	(7) Expenditures This Report			
Cas	h & Checks \$, 9 , <u>046</u> . <u>00</u>	Monetary Expenditures \$,2, 360 . 89			
Loar	ns \$,,	Transfers to Office Account \$, , .			
Tota	Monetary \$,9 , <u>046</u> . <u>00</u>	Total Monetary \$, 2 360 . 89			
In-K	ind \$, , .	,,,,			
		(8) Other Distributions			
		\$, ,			
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
	\$, 9 , _04600	\$,2, <u>260</u> . <u>89</u>			
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)					
Lo	certify that I have examined this report and it is true, corn	ect, and complete:			
(T	_{ype name)} Daniel Gielchinsky	(Type name) Daniel Gielchinsky			
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairnerson (only for PC and PTY)			
_X	gnature	X			
اد	gnature	Signature			

(1) Name	Daniel	Gielchi	nsky 					(2)	I.D. Number			
(3) Cover F	Period	01	01	/ 2018	through	01	/ ³¹	/ ²⁰¹⁸	(4) Page	1	of 3	

(F)	(7)	Γ	(0)	1 (0)	1 (40)	1 (44)	1 (40)
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	c	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Type	Description	Amendment	Amount
1 17 18	Bernard Waldman Surfside, FL 33154	Турс	Cocapation	Туре	Description		Amount
1		I	businesman	RCT	N/A	N/A	\$250.00
1 , 17 , 18 2	Chabad at the Civic Center 5701 Marius Street Miami, FL 33146	В	N/A	RCT	N/A	N/A	\$100.00
1 , 17 , 18	Devin and Chyena Freedman Surfside, FL 33154	I	attorney	СНЕ	N/A	N/A	\$150.00
1 19 18	Seth and Elisheva Heller Miami Beach, FL	I	N/A	СНЕ	N/A	N/A	\$100.00
1 19 18	Azriel Wasserman Surfside, FL 33154	I	N/A	RCT	N/A	N/A	\$100.00
1 19 18 / /	Ben and Marissa Jacobson Surfside, FL 33154	I	businesman	RCT	N/A	N/A	\$180.00
1 19 18	Tzali and Chaya Camissar	I	N/A	RCT	N/A	N/A	\$100.00

DS-DE 13 (Rev. 11/13)

(1) Name	Daniel	Gielc	hinsky					(2) 1	.D. Number			
(3) Cover F	Period	01	/ ⁰¹	/ 2018	through	01	/ 31	/ 2018	(4) Page	2	of 3	

		1			,		·
(5)	(7)	1	(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)					İ	
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 19 18	Eric Rappaport Bay Haror Islands, FL 33154						
8		I	N/A	RCT	N/A	N/A	\$100.00
1 , 19 , 18	Dovid Duchman Surfside, FL 33154	ı	attorney	RCT	N/A	N/A	\$180.00
9			accorney	RCI	N/A	N/A	\$180.00
1 , 19 , 18	Brent Levinson 8919 Abbot Ave Surfside, FL 33154						
10		I	N/A	СНЕ	N/A	N/A	\$36.00
1 , 19 , 18	Shutts & Bowen 200 S Biscayne Blvd #4100, Miami, FL 33131	В	law firm	CHE	N/A	N/A	\$1,000.00
1 19 18	Jason Halpern New York, NY	I	developer	СНЕ	N/A	N/A	\$1,000.00
1 19 18 / /	Pointe Development Company 1135 Kane Concourse Bay Harbor Islands, FL 33154	I	real estate	СНЕ	N/A	N/A	\$1,000.00
1 21 18 /	David and Mayra Lichter Miami, FL	I	mediator	СНЕ	N/A	N/A	\$250.00

DS-DE 13 (Rev. 11/13)

(1) Name	Daniel	Gielo	chinsky					(2) 1	.D. Number			_
(3) Cover F	Pariod	01	01	2018	through	01	, 31	2018	(4) Page	3	of 3	

(5) Date (6) Sequence Number 24 18 / / 18 / / 18	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Akerman, LLP 98 SE 7th St #1100, Miami, FL 33131 Neisen and Ana Kasdin Miami Beach, FL	В	ontributor Occupation law firm	(9) Contribution Type CHR	In-kind Description	Amendment	(12) Amount \$1,000.00
(6) Sequence Number 24 18 / / 18	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code Akerman, LLP 98 SE 7th St #1100, Miami, FL 33131 Neisen and Ana Kasdin	В	Occupation	Туре	Description		
Sequence Number 24 18 / / / 25 18	Street Address & City, State, Zip Code Akerman, LLP 98 SE 7th St #1100, Miami, FL 33131 Neisen and Ana Kasdin	В	Occupation	Туре	Description		
Number 24 18 / / / 25 18	City, State, Zip Code Akerman, LLP 98 SE 7th St #1100, Miami, FL 33131 Neisen and Ana Kasdin	В	Occupation	Туре	Description		
24 18 / /	Akerman, LLP 98 SE 7th St #1100, Miami, FL 33131 Neisen and Ana Kasdin	В	law firm				
/ / / / 18 / 18 / 18	98 SE 7th St #1100, Miami, FL 33131 Neisen and Ana Kasdin			CHR	N/A	M/A	\$1,000.00
1 1	Neisen and Ana Kasdin			CHR	N/A	N/A	\$1,000.00
1 1	Neisen and Ana Kasdin Miami Beach, FL	I	attorney				
19 18		I	attorney				
19 18		ſ		CHE	N/A	N/A	\$500.00
1 1	Genovese Joblove Battista 100 SE 2nd St, Miami, FL 33131	I	law firm	CHE	N/A	n/a	\$1,000.00
	Pluskin Pormal green						
/ ³⁰ / ¹⁸	Surfside, FL 33154	I	real estate	СНЕ	N/A	n/a	\$1,000.00
30 18 / /	9316 Collins Ave, LLC 3921 ALTON RD MIAMI BEACH, FL 33140	I	real estate	СНЕ	N/A	N/A	\$1,000.00
1 1				/			
1 1						/	
	/ 18 / 18 / 18 / 18 / 18 / 18 / 18 / 18	Battista 100 SE 2nd St, Miami, FL 33131 30	Battista 100 SE 2nd St, Miami, FL 33131 30	Battista 100 SE 2nd St, Miami, FL 33131 Elyakim Boymelgreen Surfside, FL 33154 I real estate 9316 Collins Ave, LLC 3921 ALTON RD MIAMI BEACH, FL 33140 I real estate	Battista 100 SE 2nd St, Miami, FL 33131 I law firm CHE Elyakim Boymelgreen Surfside, FL 33154 I real estate CHE 9316 Collins Ave, LLC 3921 ALTON RD MIAMI BEACH, FL 33140 I real estate CHE	Battista 100 SE 2nd St, Miami, FL 33131 I law firm CHE N/A 100 SE 2nd St, Miami, 1 law firm CHE 100 SE 2nd St, Miami, 1 law firm CHE 100 SE 2nd St, Miami, 1 law firm CHE 100 SE 2nd St, Miami, 1 law firm CHE 1 law firm CHE 1 law firm CHE 1 law firm	Battista 100 SE 2nd St, Miami, FL 33131 I law firm CHE N/A N/A N/A N/A Surfside, FL 33154 I real estate CHE N/A

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky	(2) I.D. Number
(3) Cover Period $\frac{01}{}$ / $\frac{01}{}$ / $\frac{2018}{}$ through $\frac{01}{}$ / $\frac{31}{}$	

(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	
1 /30 / 18	Get Elected, Inc. 8020 SW 19th Street Miami, FL 33155	political consultant, website creation and design, lawn signs, logo design, etc.	CAN & ECC	N/A	\$2,326.73
2	Town of Surfside Surfside, FL	registration	CAN	N/A	\$25.00
1 /19 /18	GoDaddy.com, LLC 14455 N. Hayden Rd. Suite 219 Scottsdale, AZ 85260	website hosting	CAN	N/A	\$9.16
//					
//					
//					
/ /					\

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



	OFFICE USE ONLY
Name	OTTIOE COL ONE.
Daniel Greklinsky	
I.D. Number	
Address (number and street)	
9511 Collins Ave, #711	
City, State, Zip Code	
Surtside fl 32/54	
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	
☐ Mayor	
Commissioner, District	_
☐ Property Appraiser	
☐ Clerk of the Circuit Courts	
☐ Community Council, Area, Sub	o-Area
REPORT IDEN	ITIFIERS
Report Name 2018M1 Cover Period	1/1/2018 through 1/31/2018
Report Type Doriginal DAmendment	
CERTIFIC It is a first degree misdemeanor for any person	
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.
Daniel Gelchinsky	- Daniel Gelchinsky
(Type name) Treasurer Deputy Treasurer	(Type name) Candidate
X //	x 19/
Signature	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 Grelchin.	sly	(2) I.D. Number	,
(3) Report	Name 2618M1	(4) Cover Period	(2) I.D. Number	1/2018
	Type Original Amendment	(6) Page	of	
(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 TREASURE	R'S REPORT SUMMARY									
(1)	Daniel Gielchinsky	OFFICE USE ONLY									
	Name	Z124118- JV									
(2)	9511 Collins Ave, #711	7:44 pm.									
	Address (number and street) Surfside, FL 33154										
	City, State, Zip Code										
	☐ Check here if address has changed	(3) ID Number:									
(4)	Check appropriate box(es):	(e) 18 Hamber.									
(7)	Candidate Office Sought: Commissione	er									
	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 ☐ Check here if no other IE or EC reports will be filed											
	individual making electioneering communications)										
(5) Report Identifiers											
Cov		02 / 16 / 18 Report Type: 25P1									
⊘ 0		ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
(0)	Contributions This Report	Monetary									
Cas	h & Checks \$, 4, 980.00	Expenditures \$, 0, 0 . 0									
											
Loai	ns \$,,	Transfers to Office Account \$									
- .	l Monetary \$, 4, 980 . 00	Office Account \$, ,									
lota	Il Monetary \$,4 , <u>980</u> . <u>00</u>	Total Monetary \$, 0 0 . 0									
ln I/	ind \$, , .	Total Monetary \$, , ,									
In-K	ma , ,	(8) Other Distributions									
		\$, ,									
		<u> </u>									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$,1402600	\$,2, <u>260</u> . <u>89</u>									
	(11) Ceri	tification									
	It is a first degree misdemeanor for any pers	on to falsify a public record (ss. 839.13, F.S.)									
lo	certify that I have examined this report and it is true, corr	ect, and complete:									
(Т	_{ype name)} Daniel Gielchinsky	_(Type name) Daniel Gielchinsky									
	Individual (only for IE	☑ Candidate ☐ Chairperson (only for PC and PTY)									
U											
<u>X</u>		x									
Si	gnature	Signature									

(1) Name	Daniel	Gielc	chinsky					(2) I	.D. Number			_
(3) Cover F	Period	02	/ 01	/ 2018	through	02	/ ¹⁶	/ 2018	(4) Page	1	of ²	

(7)	(8)		(9)	(10)	(11)	(12)
(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	1	1	Contribution Type	In-kind Description	Amendment	Amount
Block 53, LLC 1328 Independence Ave SE Washngton DC 20003	В	architect	СНЕ	N/A	N/A	\$250.00
Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154	В	real estate	СНЕ	N/A	N/A	\$1000.00
Jonathan Horn 1421 BISCAYA DR Surfside, FL 33154	I	real estate	СНЕ	N/A	N/A	\$200.00
Eveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154-1600	I	doctor	СНЕ	N/A	N/A	\$250.00
Beach House Hotel, LLC 9449 Collins Ave Surfside FL 33154	В	real estate	СНЕ	N/A	N/A	\$1,000.00
Ravit Feldman SLP 10065 Bay Harbor Terrace, Bay Harbor Islands, FL 33154	I	therapist	RCT	N/A	N/A	\$1,000.00
Seth Salver 10155 Collins Ave Apt 204 Bal Harbor FL 33154	I	accountant	СНЕ	N/A	N/A	\$180.00
	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Block 53, LLC 1328 Independence Ave SE Washington DC 20003 Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 Jonathan Horn 1421 BISCAYA DR Surfside, FL 33154 Eveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154-1600 Beach House Hotel, LLC 9449 Collins Ave Surfside FL 33154 Ravit Feldman SLP 10065 Bay Harbor Terrace, Bay Harbor Terrace, Bay Harbor Islands, FL 33154 Seth Salver 10155 Collins Ave Apt 204	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Block 53, LLC 1328 Independence Ave SE Washington DC 20003 Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 B Jonathan Horn 1421 BISCAYA DR Surfside, FL 33154 Eveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154-1600 Beach House Hotel, LLC 9449 Collins Ave Surfside FL 33154 B Ravit Feldman SLP 10065 Bay Harbor Terrace, Bay Harbor Terrace, Bay Harbor Islands, FL 33154 Seth Salver 10155 Collins Ave Apt 204	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Block 53, LLC 1328 Independence Ave SE Washington DC 20003 Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 Jonathan Horn 1421 BISCAYA DR Surfside, FL 33154 Eveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154-1600 Beach House Hotel, LLC 9449 Collins Ave Surfside FL 33154 Ravit Feldman SLP 10065 Bay Harbor Terrace, Bay Harbor Terrace, Bay Harbor Islands, FL 33154 I therapist Seth Salver 10155 Collins Ave Apt 204	Full Name (Last, Suffix, First, Middle) Street Address & Contributor City, State, Zip Code Block 53, LLC 1328 Independence Ave SE Washington DC 20003 Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 B real estate CHE Leveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154-1600 Beach House Hotel, LLC 9449 Collins Ave Surfside FL 33154 B real estate CHE Ravit Feldman SLP 10065 Bay Harbor Terrace, Bay Harbor Islands, FL 33154 I therapist RCT	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Block 53, LLC 1328 Independence Ave SE Washington DC 20003 Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 Jonathan Horn 1421 BISCAYA DR Surfside, FL 33154 I real estate Eveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154 B real estate CHE N/A CHE N/A Adoctor CHE N/A Ravit Feldman SLP 10065 Bay Harbor Terrace, Bay Harbor Terrace, Bay Harbor Islands, FL 33154 I therapist RCT N/A Seth Salver 10155 Collins Ave Apt 204 Apt 204 Apt 204 Apt 204 Apt 204 Apt 205 Apt 33154 I therapist RCT N/A	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Dlock 53, LLC 1328 Independence Ave SE Washington DC 20003 Monceau Realty 1108 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 Jonathan Horn 1421 BISCAYA DR Surfside, FL 33154 I real estate CHE N/A N/A N/A Eveleyn and Shmuel Katz 10185 Collins Ave, Bal Harbour, FL 33154 J doctor CHE N/A N/A N/A Ravit Feldman SLP 1065 Bay Harbor Islands, FL 33154 I therapist RCT N/A N/A N/A Seth Salver 10155 Collins Ave Bay Harbor Islands, FL 33154 I therapist RCT N/A N/A N/A Seth Salver 10155 Collins Ave Bay Harbor Islands, FL 33154 I therapist RCT N/A N/A N/A

DS-DE 13 (Rev. 11/13)

(1) Name	l Gielchinsky			(2)	I.D. Number		
(3) Cover Period	02 / 01 / 2018	throu	gh /	16 / 2018	_ (4) Page	2	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	1	(8) ontributor	(9) Contribution	(10) In-kind	(11)	(12)
Number 2 14 18 / / 8	City, State, Zip Code Kopi Karp Architecture & Interior Design Inc 2915 Biscayne Blvd Suite 200 Miami, FL 33137	В	Occupation Architect	СНЕ	Description N/A	Amendment N/A	Amount \$500.00
2 14 18 9	11601 Biscayne, LLC 2915 Biscayne Blvd Suite 200 Miami, FL 33137	В	real estate	СНЕ	N/A	N/A	\$500.00
2 / ¹⁴ / ¹⁸	Esther Farache 9499 Collins Ave Surfside FL 33154	В	realtor	СНЕ	N/A	N/A	\$100.00
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Danie	el Gielchinsky	((2) I.D. Number					
(3) Cover Perio	d <u>02 / 01 / 2018</u> through <u>02</u>	/ 16 / 2018 (4	4) Page	of _	1			
(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)	(11) Amount			
/ /								
//								
//								
/ /								
/ /								
//								

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



Name Daniel Grelchiasty	OFFICE USE ONLY								
I.D. Number									
Address (number and street) 9SII (allus Ave #71/									
City, State, Zip Code Sursibe FL 33 (SY									
☐ CHECK IF ADDRESS HAS CHANGED									
Candidate for:									
☐ Property Appraiser ☐ Clerk of the Circuit Courts	□ Commissioner, District <u>Town of Scr</u> (sile) □ Property Appraiser								
REPORT IDE									
Report Name Cover Period	1 <u> </u>								
Report Type									
	ICATION								
	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.								
Daniel Gelchinsky	Doniel Gelchinsky								
(Type name)	(Type name)								
x (/	x								
Signature	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 Gielchinsky		(2) I.D. Number	33
(3) Report I	Name	(4) Cover Period	(2) I.D. Number	16/18
(5) Report	Type Doriginal DAmendment	(6) Page	of	
(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	OFFICE USE ONLY								
	Name									
(2)	9511 Collins Ave, #711									
	Address (number and street) Surfside, FL 33154	03-09-18P12:21 RCVD								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:								
(4)	Check appropriate box(es):									
	(4) Check appropriate box(es): ☐ Candidate Office Sought: ☐ 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								
Cov	er Period: From 02 / 17 / 18 To	03 / 02 / 18 Report Type: 11P1								
✓ C	original Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cas	h & Checks \$, 5 , <u>886</u> . <u>45</u>	Monetary Expenditures \$, 4 , 727 . 44								
Loai		Transfers to Office Account \$, , .								
Tota	Monetary \$, 5 , <u>886</u> . <u>45</u>	Total Monetary \$, 0 _, _0 . 0								
In-K	ind \$, ,									
		(8) Other Distributions \$, ,								
(9)	TOTAL Monetary Contributions To Date \$, 19 , _912 45	(10) TOTAL Monetary Expenditures To Date \$,6 ,98833								
	(11) Cert It is a first degree misdemeanor for any pers									
10	certify that I have examined this report and it is true, corr	Com Lichter Com Com Top Top Top Andrews Andrews Community Scholars (1997) Community File								
	ype name) Daniel Gielchinsky	(Type name) Daniel Gielchinsky								
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Chairperson (only for PC and PTY)								
Х		x //								
-	ignature	Signature								

(1) Name	Daniel	Gielo	chinsky					_ (2) I	.D. Number	83		_
(3) Cover P	eriod	02	17	2018	through	03	02	2018	(4) Page	1	of ²	

	(5)	(7)		(8)	(9)	(10)	(11)	(12)
	Date	Full Name			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			,
	(6)	(Last, Suffix, First, Middle)						
	Sequence	Street Address &		ontributor	Contribution	In-kind		
	Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
2	20 18	Josh Greisman 9549 Carlye Ave Surfside, FL 33154	I	businessman	RCT	N/A	N/A	\$242.45
2	21 ₁ 18	Clarte Realty LLC 1111 Brickell Ave #1100		2				
2		MIAMI, FL 33131	В	real estate	CHE	N/A	N/A	\$250.00
2	/ 21 / 18	Ramzi C. Achi 221 E Dilido Drive Miami Beach, FL 33139						
3			I businessman		CHE	N/A	N/A	\$750.00
2	21 18	LMS Consulting LLC 3060 NE 40TH COURT FT. LAUDERDALE, FL 33308	В	consulting	СНЕ	N/A	N/A	\$1,000.00
2	21 18	Sevilla Associates LLC 2631 Ponce DeLeon Blvd Coral Gables, FL 33134	В	real estate	CHE	N/A	N/A	\$500.00
2	21 18 / /	Alhambra Cicle Investments LLC 2631 Ponce DeLeon Blvd Coral Gables, FL 33134	В	real estate	СНЕ	N/A	N/A	\$500.00
2	21 18	SC Property Acquisition LLC 176 NE 43rd Street Miami, FL 33137	В	real estate	СНЕ	N/A	N/A	\$500.00
		1	1	1				

DS-DE 13 (Rev. 11/13)

(1) Name	Daniel	Gielo	chinsky					(2) I	.D. Number	83	
(3) Cover P	eriod	02	/ ¹⁷	/ 2018	through	03	/ 02	2018	(4) Page	2	of ²

	(5)	T	1	(0)			T	(40)
	(5)	(7)		(8)	(9)	(10)	(11)	(12)
	Date	Full Name						
	(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
	Number	City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
	Number	Seaway Condo	Туре	Occupation	Туре	Description	, minimum minimum	Amount
2	21 18	Acquisition LLC						
	/ /	176 NE 43rd Street Miami, FL 33137	_	7		37/3	/.	41 000 00
8		Midmi, Ph 33137	В	real estate	CHE	N/A	N/A	\$1,000.00
		Surf Club Apartments						
2	/ ²¹	Inc. 500 W Cypress CReek Rd						
9		Suite 770	В	real estate	CHE	N/A	N/A	\$1,000.00
		Fort Lauderdale, FL 33309						
		Daniel Sragowicz						
3	, 5 , 18	Bal Harbour, FL 33154						
1.0	, ,		I	n/a	RCT	N/A	N/A	\$72.00
10			-	,		11/11	.,,	4,2100
3	, 5 , 18	Richard Sragowicz Bay Harbor Islands, FL						
		33154		,				
11			I	n/a	RCT	N/A	N/A	\$72.00
_	- To 1							
	1 1							
	1 1							

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky	(2) I.D. Number ⁸³

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Suffix, First, Middle) treet Address & (add office sought if contribution to a candidate)		Amendment	Amount
2 / 20/18	Office Depot 12255 Biscayne Blvd North Miami, FL 33181	print/supplies	CAN	N/A	\$213.99
2 / 21 / 18	Office Depot 12255 Biscayne Blvd North Miami, FL 33181	print/supplies	CAN	N/A	\$256.79
2 / 21 18	Child Enrichment Center 9540 Collins Ave Surfside, FL 33154	greeting baskets	ECC	N/A	\$301.00
2 21 18	Office Depot 12255 Biscayne Blvd North Miami, FL 33181	print/supplies	CAN	N/A	\$533.95
² / ²¹ / ¹⁸	Get Elected, Inc. 8020 SW 19th Street Miami, FL 33155	political consultant, website maintenance, mailers, etc.	CAN & ECC	N/A	\$1,897.25
2 26 18	Publix 9400 Harding Ave. Surfside, FL 33154	supplies for events	CAN	N/A	\$172.45
² / ²⁶ / ¹⁸	9500 OCEANS CONDOMINIUM, INC. 9511 COLLINS AVE. SURFSIDE, FL 33154	room fee	CAN	N/A	\$200.00
² / ²⁷ / ¹⁸	Rolling Pin Bakery 9523 Harding Ave Surfside, FL 33154	supplies for event	CAN	N/A	\$13.50

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Daniel	Gielch	ninsky						(2) I.D. Number <u></u>	3	
(3) Cover Period	02	/ 17	/ 2018	through	03	/_02	/ 2018	(4) Page	of	

	(7)	(0)	(0)	(40)	(44)
(5) Date	(7)	(8)	(9)	(10)	(11)
(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
2 / 27/18	Office Depot 12255 Biscayne Blvd North Miami, FL 33181	print/supplies	CAN	N/A	\$485.53
2 / 21/18	Office Depot 12255 Biscayne Blvd North Miami, FL 33181	print/supplies	CAN	N/A	\$574.98
2 / 27 18 11	Miami-Dade County Elections Department 2700 NW 87th Ave # 100 Doral, FL 33172	voter list	CAN	N/A	\$60.00
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//					
//					

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



	OFFICE USE ONLY				
Name					
Daniel Grelchinsky	_				
I.D. Number					
Address (number and street) 9511 Collins Ave, #711	03-09-18P12:22 RCVD				
City, State, Zip Code Suffside fl 33154					
☐ CHECK IF ADDRESS HAS CHANGED					
Candidate for:					
□ Mayor □ Commissioner, District <u>Surfside</u> □ Property Appraiser □ Clerk of the Circuit Courts □ Community Council, Area, Sub-Area					
REPORT IDENTIFIERS					
Report Name Period 2/17/18 through 3/2/18					
Report Type Original Amendment					
CERTIFICA					
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, I certify that I have examined this report and it is true,					
	orrect, and complete.				
Doniel Gielchinsky	Daniel Grelchinsky				
(Type name)	Type name) Candidate				
w ///	v M				
Signature	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 Gielchinsky	,		(2) I.D. Number	3
	Name IIPI		2/17/18	through <u>3/2</u>	2/18
	Type Driginal Amendment		/	of/	
(7) Row Number	(8) Full Name (Last, Suffix, First, Middle)	(9) Employed By	Name of Organiz	10) ation Employed By ired by campaign)	(11) Amendment Type
1	Blunstein, Jerold	consultant	Get Elec	ted, Inc.	APD
			l	34	

	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Daniel Gielchinsky	OFFICE USE ONLY
	Name	
(2)	9511 Collins Ave, #711	03-16-18P02:09 RCVD
	Address (number and street) Surfside, FL 33154	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number: 83
(4)	Check appropriate box(es):	
	✓ Candidate Office Sought: Commission	er
	☐ 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
	individual making electioneering communications)	
	(5) Report	Identifiers
Cov	er Period: From 03 / 03 / 18 To	03 / 15 / 18 Report Type: 4P1
 ✓ 0	riginal Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
Cas	h & Checks \$, , 500 00	Monetary Expenditures \$,4, 085 . 16
Loar	s,	Transfers to Office Account \$, , .
Tota	Monetary \$,, 500. 00	Total Monetary \$,4 , _085 . 16
In-K	ind \$, ,	
		(8) Other Distributions
		\$, ,
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$	\$, <u>1</u> 1, <u>073</u> . <u>49</u>
	(11) Cert	tification
	It is a first degree misdemeanor for any pers	on to falsify a public record (ss. 839.13, F.S.)
	certify that I have examined this report and it is true, corr	
_(T	ype name) Daniel Gielchinsky	_(Type name) Daniel Gielchinsky
	Individual (only for IE	✓ Candidate ☐ Chairperson (only for PC and PTY)
	DI	
_X	ignature	X Signature
5	gnature	Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	l Gielchinsky			(2)	I.D. Number	83	7
(3) Cover Period	03 / 03 / 2018	throu	gh /	15 / 2018	_ (4) Page		of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
3 15 18 / /	GM Trial Lawyers for a Better and Smarter FL	В	law	CHE	N/A	N/A	\$500.00
1 1							
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Daniel	Gielc	hinsky						(2) I.D. Number 83		
(3) Cover Period	03	/ 03	/ 2018	through	03	/ 15	/ 2018	(4) Page	of	

	d/through/		i) Page	of _		
(5)	(7)	(8)	(9)	(10)	(11)	
Date	Full Name	Purpose				
(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	
3 / 6 / 18	Facebook 1 Hacker Way Menlo Park, CA 94025	page promotion	ECC	N/A	\$3.17	
3 / 6 / 18	Facebook 1 Hacker Way Menlo Park, CA 94025	page promotion	ECC	N/A	\$18.80	
3 / 9 / 18	Office Depot 12255 Biscayne Blvd North Miami, FL 33181	print/supplies	CAN	N/A	\$246.09	
3 15 18	Get Elected, Inc. 8020 SW 19th Street Miami, FL 33155	political consultant, website maintenance, mailers, etc.	CAN & ECC	N/A	\$1,100.00	
3 / 15/18	Get Elected, Inc. 8020 SW 19th Street Miami, FL 33155	political consultant, website maintenance, shirts mailers, etc.	CAN & ECC	N/A	\$2,717.10	
//						
/ /						
DS-DE 14 (Rev. 1	1/13) SEE REVERSE FOR INS	TRUCTIONS AND CODE	VALUES			

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



Name Danjel Gjelchjusky	OFFICE USE ONLY
I.D. Number	03-16-18P02:09 RCVD
Address (number and street) 9511 (ollins Ave, #711	_
City, State, Zip, Code Surtside, fl 33 154	_
☐ CHECK IF ADDRESS HAS CHANGED	
Candidate for:	
□ Mayor □ Commissioner, District	Area
REPORT IDENT	TFIERS
Report Name Cover Period Report Type Original Amendment	3/3/18 through 3/15/18
CERTIFICA	ATION
It is a first degree misdemeanor for any person	
	certify that I have examined this report and it is true, orrect, and complete.
Type name) Treasurer Deputy Treasurer (T	Type name) Gre/chrusky Type name) Grandidate
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	Dayle Gelchin	sky	(2) I.D. Number	83
(3) Report	Name 4 <i>P</i> /	(4) Cover Period _	(2) I.D. Number	5/18
	Type Doriginal Amendme	ent (6) Page	of	
(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) y Amendment
1	Blumstein, Jerold	cousultent	Get Elected, Inc.	
			,	
				1

	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Daniel Gielchinsky	OFFICE USE ONLY							
	Name								
(2)	9511 Collins Ave, #711 Address (number and street)								
	Surfside, FL 33154	06-18-18A08:50 RCVD							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: <u>83</u>							
(4)	Check appropriate box(es):								
	Commission ☐ Candidate Office Sought: Commission ☐ 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							
Cove	er Period: From 03 / 15 / 18 To	6 / 18 / 18 Report Type: 18TRG							
 ✓ 0	riginal Amendment Spe	cial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , <u>0</u>	Monetary							
Loar	s,, <u>0</u>	Transfers to Office Account \$, , .							
	I Monetary \$, , 0	Total Monetary \$, 6 , 068 88							
In-K	ind \$,, <u>0</u>	(0)							
		(8) Other Distributions \$, 3 , _27008							
(9)	TOTAL Monetary Contributions To Date \$, 20 , 412 45	(10) TOTAL Monetary Expenditures To Date \$, 20, _41245							
	(11) Cert It is a first degree misdemeanor for any pers	on to falsify a public record (ss. 839.13, F.S.)							
	certify that I have examined this report and it is true, corn	5.00							
	ype name) Daniel Gielchinsky	(Type name) Daniel Gielchinsky							
	Individual (only for IE	☐ Chairperson (only for PC and PTY)							
_X		x /							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	l Gielchinsky			(2)	I.D. Number	83	
(3) Cover Period	03	throu	gh /	18 / 2018 /	_ (4) Page	<u> </u>	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	None						
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(3) Cover Period _	03 /	15	2018	through _	06	, 18	/_2018	(4) Page	of	3
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(5)	(7)	(8)	(9)	(10)	(11)
(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
3/16/18	Publix 9400 Harding Ave Surfside, FL 33154	election supplies	CAN	N/A	\$233.50
3 / 19 / 18	Target 14075 Biscayne Blvd North Miami Beach, FL 33181	election supplies	CAN	N/A	\$109.02
3 / 19 / 18	Natalie Vaturi 9289 Dickens Ave Surfside, FL 33154	campaign walkers, signs and flyer distribution	CAN	N/A	\$200.00
3 20 18	Publix 9400 Harding Ave Surfside, FL 33154	election supplies	CAN	N/A	\$77.80
3 / 18 / 18	Yossie Horowitz 9241 Carlyle Ave Surfside, FL 33154	host campaign event, supply food, etc.	CAN	N/A	\$900.00
3 /23 / 18	The Shul 9540 Collins Ave Surfside, FL 33154	charitable	DIS	N/A	\$900.00
3 / ²³ / ¹⁸	Get Elected Inc. 8020 SW 19th Street Miami, FL 33155	political consultant, mailers, campaign workers, signs, etc.	CAN & ECC	N/A	\$3,225.00
3/ 26/18	Richard Planet Bay Harbor Islands, FL 33154	campaign work, signs and flyers	CAN	N/A	\$504.00

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Daniel Gielchinsky (2	2) I.D. Number ⁸³
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(3) Cover Period 03 / 15 / 2018 through 66 / 18 / 2018 (4) Page 2 of 3

(5)	(7)	(8)	(9)	(10)	(11)
(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/ 16/ 18 9	Facebook 1 Hacker Way Menlo Park, CA 94025	page promotion	ECC	N/A	\$28.56
3/21/18	Town of Surfside 9293 Harding Ave Surfside, FL 33154	purchase picture for campaign use	CAN	N/A	\$6.00
5 / 10 / 18	AlephTV Foundation Inc 3440 NE 192ND ST, #1B AVENTURA, FL 33180	charitable	DIS	N/A	\$360.00
5 / 15 / 18	City National Bank 300 71st St #1, Miami Beach, FL 33141	service fee	CAN	N/A	\$20.00
5 /21 / 18	Get Elected Inc. 8020 SW 19th Street Miami, FL 33155	campaign consulting	CAN	N/A	\$750.00
5 25 18	Ruth K Broad Bay Harbor PTA 1155 93rd Street Bay Harbor Islands, FL 33154	charitable	DIS	N/A	\$500.00
6/8/18	The Shul 9540 Collins Ave Surfside, FL 33154	charitable	DIS	N/A	\$262.50
6 15, 18	City National Bank 300 71st St #1, Miami Beach, FL 33141	service fee	CAN	N/A	\$20.00

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Daniel	Gielch	insky						(2) I.D. Number 8	3	
(3) Cover Period	03	/15	/ 2018	through_	06	/ 18	/_2018	(4) Page	of	

(5)	(7)	(8)	(9)	(10)	(11)
(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
6 / 17 / 18	Mount Sinai Medical Center 4300 Alton Road Miami Beach, FL 33140	charitable	DIS	N/A	\$1,000.00
6 / 17 / 18	Youth Environmental Alliance 6900 SW 21st Ct, Unit 8 Davie, FL 33317	charitable	DIS	N/A	\$515.00
6 17 18	American Red Cross Greater Miami & The Keys 335 SW 27th Avenue Miami, FL 33135	charitable	DIS	N/A	\$92.58
20					
/ /					
/ /					
23					
24)

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



	OFFICE USE ONLY				
Name Daniel Grelchinsky					
I.D. Number					
Address (number and street) 9511 (allins Ave #711	06-18-18A08:50 RCVD				
City, State, Zip Code Surfide, FL 33/84					
☐ CHECK IF ADDRESS HAS CHANGED					
Candidate for:					
□ Mayor □ Commissioner, District- Town of Sufferde □ Property Appraiser □ Clerk of the Circuit Courts □ Community Council, Area, Sub-Area					
REPORT IDE	NTIFIERS				
Report Name 18 TRO Cover Period 3/15/18 through 6/18/13					
Report Type Original Amendment					
	CATION				
It is a first degree misdemeanor for any pers I certify that I have examined this report and it is true, correct, and complete.	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.				
Type name) Treasurer Deputy Treasurer	(Type name) Gelchins				
X	X				
Signature	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 Gelchin	nsky	(2) I.D. Number	28
(3) Report	Name 18TRG	(4) Cover Period	3/18/18 through 6/18	7/18
(5) Report	Type Original Amendment	(6) Page	(2) I.D. Number through _6// of	
(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)