

**STATEMENT OF  
CANDIDATE**

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

OFFICE USE ONLY

09-22-15 11:18 RCVD

*Sandra Novoa*

I, Barry Cohen,  
candidate for the office of Commissioner;

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

X

  
Signature of Candidate

9/22/15  
Date

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

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

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

(PLEASE PRINT OR TYPE)

09-22-15 11:18 RCVD

*Sandra Novoa*

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

**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

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

2. Name of Candidate (in this order: First, Middle, Last)  
*Barry Richard Cohen*

3. Address (include post office box or street, city, state, zip code)  
*9056 Bay Drive  
Surfside, FL 33154*

4. Telephone  
*(305) 790-1381*

5. E-mail address  
*Barry@BarryCohenLawfirm.com*

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

7. If a candidate for a nonpartisan office, check if applicable:  
 My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a  
 Write-In     No Party Affiliation     \_\_\_\_\_ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer  
*Barry Cohen*

11. Mailing Address  
*9056 Bay Drive*

12. Telephone  
*(305) 790-1381*

13. City  
*Surfside*

14. County  
*Miami-Dade*

15. State  
*FL*

16. Zip Code  
*33154*

17. E-mail address  
*Barry@BarryCohenLawfirm.com*

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

19. Name of Bank  
*Citibank*

20. Address  
*9525 Harding Avenue*

21. City  
*Surfside*

22. County  
*Miami-Dade*

23. State  
*Florida*

24. Zip Code  
*33154*

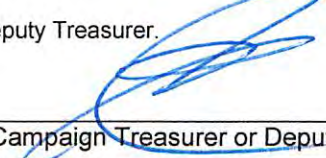
**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.**

25. Date  
*9/18/15*

26. Signature of Candidate  
*X* 

27. **Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)  
I, *Barry Cohen*, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:  Campaign Treasurer     Deputy Treasurer.  
*9/18/15*  
Date

*X*   
Signature of Campaign Treasurer or Deputy Treasurer

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)

Surfside, Florida 33154

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

10-13-15 16:48 RCVD *syn*

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

### (5) Report Identifiers

Cover Period: From 09 / 01 / 2015 To 09 / 30 / 2015 Report Type: TR

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ 0 ,     ,     .    

Loans \$     ,     ,     .    

Total Monetary \$     ,     ,     .    

In-Kind \$     ,     ,     .    

### (7) Expenditures This Report

Monetary Expenditures \$ 0 ,     ,     .    

Transfers to Office Account \$     ,     ,     .    

Total Monetary \$     ,     ,     .    

### (8) Other Distributions

\$ 0 ,     ,     .    

### (9) TOTAL Monetary Contributions To Date

\$ 0 ,     ,     .    

### (10) TOTAL Monetary Expenditures To Date

\$ 0 ,     ,     .    

### (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) Barry Cohen

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

X  
Signature

(Type name) Barry Cohen

Candidate  Chairperson (only for PC and PTY)

X  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 09 / 01 / 2015 through 09 / 30 / 2015 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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N/A

### CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 09 / 01 / 2015 through 09 / 30 / 2015

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
/ /					
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT  
PAID CAMPAIGN WORKERS PARTICIPATING  
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name  
BARRY COHEN

I.D. Number

Address (number and street)  
9056 BAY DRIVE

City, State, Zip Code  
SURFSIDE, FLORIDA 33154

CHECK IF ADDRESS HAS CHANGED

10-13-15 16:48 RCVD *SKN*

Candidate for:

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

REPORT IDENTIFIERS

Report Name 30 DAYS Cover Period 09/01/2015 through 09/30/2016

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

BARRY COHEN

(Type name)  Treasurer  Deputy Treasurer

X

Signature

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

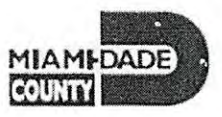
BARRY COHEN

(Type name)  Candidate

X

Signature

# PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



*This report must be filed by applicable candidates running for Miami-Dade County Charter positions:  
Mayor, Commissioner, Property Appraiser, Clerk of the Circuit Courts, and Community Council*

(1) Name BARRY COHEN (2) I.D. Number \_\_\_\_\_

(3) Report Name 30 DAYS (4) Cover Period 09/01/2015 through 09/30/2016

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

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

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)  
Surfside, Florida 33154

City, State, Zip Code

Check here if address has changed

(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

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

11-09-15 17:58 RCVD *JK*

### (5) Report Identifiers

Cover Period: From 10 / 01 / 2015 To 10 / 31 / 2015 Report Type: \_\_\_\_\_

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 750.00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 750.00

### (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, correct, and complete:

(Type name) Barry Cohen

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

**X** \_\_\_\_\_  
Signature

(Type name) Barry Cohen

Candidate  Chairperson (only for PC and PTY)

**X** \_\_\_\_\_  
Signature



# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 01 / 2015 through 10 / 31 / 2015 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10 / 07 / 15	Daniel Shapiro 9595 Collins Avneue #705 Surfside, FL 33154	I	Business O	CHE			250.00
10 / 11 / 15	David Lichter 1932 N.E. 119th Road North Miami, FL 33181	I	Mediator	CHE			500.00
/ /							
/ /							
/ /							
/ /							

11-09-15 17:58 RCVD *sen*

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 01 / 2015 through 10 / 31 / 2015

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT  
PAID CAMPAIGN WORKERS PARTICIPATING  
IN ABSENTEE BALLOT ACTIVITIES SUMMARY



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street) 9056 Bay Dr.

City, State, Zip Code Surfside, FL 33154

CHECK IF ADDRESS HAS CHANGED

11-09-15 17:58 RCVD *SKM*

Candidate for:

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

REPORT IDENTIFIERS

Report Name \_\_\_\_\_ Cover Period 10-1-15 through 10-31-15

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen  
(Type name)  Treasurer  Deputy Treasurer

**X**  
Signature [Signature]

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

Barry Cohen  
(Type name)  Candidate

**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 Barry Cohen (2) I.D. Number \_\_\_\_\_  
 (3) Report Name \_\_\_\_\_ (4) Cover Period 10-1-15 through 10-31-15  
 (5) Report Type  Original  Amendment (6) Page 1 of 1

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

11-09-15 17:59 RCVD Skn



7-21-15

# TOWN OF SURFSIDE

MUNICIPAL BUILDING  
9293 HARDING AVENUE  
SURFSIDE, FLORIDA 33154

11-23-15 A11:19 RCVD *sun*

## GENERAL ELECTION – MARCH 15, 2016

### SWORN STATEMENT OF QUALIFICATION

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

STATE OF FLORIDA }

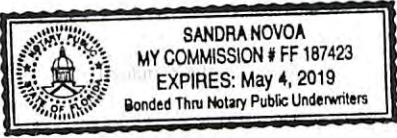
COUNTY OF MIAMI-DADE }

TOWN OF SURFSIDE }

I solemnly swear (or affirm) under oath, that my name is Barry Cohen, 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 9056 Bay Dr. Surfside FL 33154, my occupation is Lawyer; that I have been a resident of the Town of Surfside since 1985; that I will be at least twenty-one (21) years of age by December 7, 2015 and that if elected, I will willingly serve as Commissioner (~~Mayor~~ or Commissioner) of the Town of Surfside, if elected.

[Signature] 11/23/15  
Signature of Candidate Date

Sworn to and subscribed before me this 23 day of November, 2015.



[Signature]  
NOTARY PUBLIC  
Sandra Novoa  
PRINTED NAME OF NOTARY

**CANDIDATE OATH –  
NONPARTISAN OFFICE**

(Not for use by Judicial or  
School Board Candidates)

11-23-15A11:19 RCVD *sun*

OFFICE USE ONLY

**OATH OF CANDIDATE**  
(Section 99.021, Florida Statutes)

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

am a candidate for the nonpartisan office of Commissioner, \_\_\_\_\_,  
(office) (district #)  
\_\_\_\_\_ County, Florida;  
(circuit #) (group or seat #); I am a qualified elector of Miami-Dade County, Florida;

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

X

Signature of Candidate

Telephone Number

Email Address

(305) 790-1381

Barry@barrycohenlawfirm.com

9056 Bay Drive, Surfside, FL 33154  
Address City State ZIP Code

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

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

Barry Cohen

STATE OF FLORIDA

COUNTY OF Miami-Dade

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

Personally Known:  or

Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_



Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public

**DECLARATION  
FOR CANDIDATES NOT AUTOMATICALLY COVERED BY THE MIAMI-DADE  
ETHICAL CAMPAIGN PRACTICES ORDINANCE**

The Ethical Campaign Practices Ordinance may apply to any candidate, and his or her campaign staff, for elective office with a constituency in whole or in part in Miami-Dade County who agrees to abide by the mandatory and/or voluntary fair campaign practices.

I, Barry R. Cohen, a candidate for the office of Surfside commissioner, agree to abide by the mandatory fair campaign practices as provided in Section 2-11.1.1(C)(1) of the Code of Miami-Dade County and recognize as compulsory the jurisdiction of the Ethics Commission. I further agree that the Ethics Commission will have the authority to decide whether said candidate has violated the mandatory campaign practices and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any.

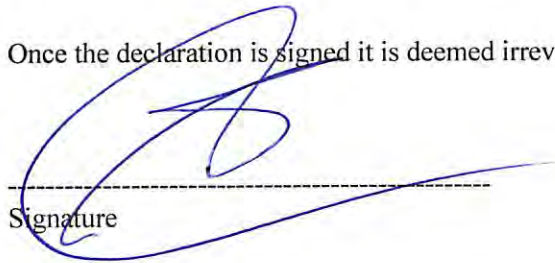
By signing this declaration, I acknowledge that I will follow the mandatory campaign practices and shall not:

- a) with actual malice make or cause to be made any untrue oral statement about another candidate or a member of his or her family or staff which exposes said person to hatred, contempt, or ridicule, or causes said person to be shunned or avoided, or injured in his or her business or occupation; or
- b) with actual malice publish or cause to be published by writing, printing, picture, effigy, sign or otherwise than by mere speech any untrue statement about another candidate or a member of his or her family or staff which exposes said person to be shunned or avoided, or injured in his or her business or occupation; or
- c) willfully injure, deface or damage or cause to be injured, defaced or damaged by any means any campaign poster, sign, leaflet, handbill, literature or other campaign material of another candidate; or
- d) knowingly obtain, or cause to be obtained campaign property of another candidate with the intent to, temporarily or permanently, deprive the candidate of a right to the property or a benefit therefrom; or
- e) knowingly file with the Ethics Commission a groundless or frivolous complaint against another candidate; or
- f) knowingly fail to remove a campaign sign within thirty (30) days of the last election in which the candidate was on the ballot; or
- g) knowingly erect or cause to be erected a campaign sign within the right-of-way limits of any County-maintained road in Miami-Dade County.

Once the declaration is signed it is deemed irrevocable for the duration of the campaign.

Signature

Date



11/23/15

In addition to abiding by the Mandatory Campaign Practices, I agree to follow the voluntary Statement of Fair Campaign Practices enumerated in Section 2-11.1(D):

1. 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 opponents' 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 which 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, which 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.



I, Barry R. Cole, a candidate for the office of Surfside Commissioner agree to abide by the Statement of Fair Campaign Practices mandatory fair campaign practices as provided in Section 2-11.1.1(C)(1) of the Code of Miami-Dade County and described on the previous page and recognize as compulsory the jurisdiction of the Ethics Commission. I further agree that the Ethics Commission will have the authority to decide whether said candidate has violated the Statement of Fair Statement Campaign Practices and, if a violation is found, the Ethics Commission has the authority to impose the appropriate penalty, if any.

Once the declaration is signed it is deemed irrevocable for the duration of the campaign.

Signature

Date

11/23/15

PLEASE FILE FORM(S) WITH THE MIAMI-DADE COMMISSION ON ETHICS AND PUBLIC TRUST AND THE MIAMI-DADE SUPERVISOR OF ELECTIONS.

Miami-Dade Commission on Ethics  
19 West Flagler Street  
Suite 220  
Miami, FL 33130

Miami-Dade Supervisor of Elections  
2700 N.W. 87th Avenue  
Doral, Florida 33172

New P.O. Box #:  
P.O.Box 521550  
Miami, Florida 33152-1550

For further information contact Miami Dade Elections Department, Public Services at 305-499-8400

**DECLARATION FOR CANDIDATES NOT AUTOMATICALLY COVERED**  
by the **Mandatory Provisions** of the  
Miami-Dade Ethical Campaign Practices Ordinance  
Miami-Dade County Code at 2-11.1.1(C) (1)

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

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

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

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

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

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

I, Barry R. Colver, a candidate for the office of  
please print your name  
Surfside Commissioner in Surfside, FL,  
elective office sought county, municipality, or other jurisdiction

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

x \_\_\_\_\_  
**Signature** 11/23/15  
**Date**

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

**NOMINATING PETITION FOR MAYOR OR COMMISSIONER  
TOWN OF SURFSIDE, FLORIDA**

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

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

1	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>305 5882449</u>
	Print Name: <u>AAKON LIPSKAL</u>	Address: _____	
2	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>305 867 5033</u>
	Print Name: <u>Merachea Kate</u>	Address: _____	
3	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>305 866 622</u>
	Print Name: <u>Adolph Zelmanovitch</u>	Address: _____	
	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>[Redacted]</u>
	Print Name: <u>[Redacted]</u>	Address: <u>[Redacted]</u>	
4	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>305 866 6118</u>
	Print Name: <u>Leon JACOBS</u>	Address: <u>9455 301</u>	
5	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>786 999 9385</u>
	Print Name: <u>Danny Shapiro</u>	Address: _____	
6	Signature: <u>[Signature]</u>	Date: _____	Voters Reg. # <u>954 588 2565</u>
	Print Name: <u>EDWARD O HANON</u>	Address: _____	
7	Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u>917-855-7051</u>
	Print Name: <u>Yehuda MARRUS</u>	Address: _____	
8	Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u>305-790-8294</u>
	Print Name: <u>Dor Schochet</u>	Address: _____	
9	Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u>917-969-2082</u>
	Print Name: <u>Shlomy Diamond</u>	Address: _____	
10	Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u>305 407 7892</u>
	Print Name: <u>[Redacted]</u>	Address: _____	
11	Signature: <u>[Signature]</u>	Date: <u>10-11-15</u>	Voters Reg. # <u>718-5945133</u>
	Print Name: <u>BEZALEL CANISSAR</u>	Address: _____	
12	Signature: <u>[Signature]</u>	Date: <u>10-11-15</u>	Voters Reg. # <u>786 512 5099</u>
	Print Name: <u>SERGIO GURVITSCH</u>	Address: <u>1105</u>	

**STATEMENT OF CIRCULATOR**

The undersigned is the circulator of the foregoing paper containing 12 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: [Signature]  
 Address of Circulator: 9056 Bay Dr  
 E-mail address of Circulator: Barry@BarryCohenLawFirm.co

**ACCEPTANCE OF NOMINATION**

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

Signature of Candidate: [Signature] Date: 10/28/15

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

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

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

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

13	Signature: <u>[Signature]</u>	Date: <u>10/11/15</u>	Voters Reg. # <u>305 244 2390</u>
	Print Name: <u>[Name]</u>	Address: <u>[Address]</u>	
14	Signature: <u>[Signature]</u>	Date: <u>10/11</u>	Voters Reg. # <u>305 861 2297</u>
	Print Name: <u>OFELIA COHEN</u>	Address: <u>[Address]</u>	
15	Signature: <u>[Signature]</u>	Date: <u>[Date]</u>	Voters Reg. # <u>109268265</u>
	Print Name: <u>ANDREW GOWRTZ</u>	Address: <u>305 795 5144</u>	
16	Signature: <u>[Signature]</u>	Date: <u>10/12/2015</u>	Voters Reg. # <u>786-285-4472</u>
	Print Name: <u>[Name]</u>	Address: <u>[Address]</u>	
17	Signature: <u>[Signature]</u>	Date: <u>[Date]</u>	Voters Reg. # <u>305 806 6361</u>
	Print Name: <u>SHMUEL TEVARDOVITZ</u>	Address: <u>[Address]</u>	
18	Signature: <u>[Signature]</u>	Date: <u>10-13-15</u>	Voters Reg. # <u>305-867-0330</u>
	Print Name: <u>EDWARD E. KOPELMAN</u>	Address: <u>[Address]</u>	
19	Signature: <u>[Signature]</u>	Date: <u>10/13/15</u>	Voters Reg. # <u>305/867-0330</u>
	Print Name: <u>PAULINE R. KOPELMAN</u>	Address: <u>[Address]</u>	
20	Signature: <u>[Signature]</u>	Date: <u>[Date]</u>	Voters Reg. # <u>305 790 1381</u>
	Print Name: <u>Barry R. Cohen</u>	Address: <u>[Address]</u>	
21	Signature: <u>[Signature]</u>	Date: <u>10-13-15</u>	Voters Reg. # <u>[Number]</u>
	Print Name: <u>VALENE BOROCHOFF</u>	Address: <u>[Address]</u>	
22	Signature: <u>[Signature]</u>	Date: <u>10/6/15</u>	Voters Reg. # <u>786-285-6553</u>
	Print Name: <u>IGHAL ELIAY</u>	Address: <u>[Address]</u>	
23	Signature: <u>[Signature]</u>	Date: <u>10/14/15</u>	Voters Reg. # <u>305-710-1791</u>
	Print Name: <u>ABE SRETOS</u>	Address: <u>[Address]</u>	
24	Signature: <u>[Signature]</u>	Date: <u>10/14/15</u>	Voters Reg. # <u>305 864 5158</u>
	Print Name: <u>BERNARD ZISMAN</u>	Address: <u>[Address]</u>	
25	Signature: <u>[Signature]</u>	Date: <u>10/29/15</u>	Voters Reg. # <u>954 655 7980</u>
	Print Name: <u>MOSHE KURINSKY</u>	Address: <u>[Address]</u>	

STATEMENT OF CIRCULATOR

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

Signature of Circulator: [Signature]  
Address of Circulator: 9056 Bay Dr  
Email address of Circulator: barry@barrycohen.com

ACCEPTANCE OF NOMINATION

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

Signature of Candidate: [Signature] Date: 10/28/15

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

# NOMINATING PETITION FOR MAYOR OR COMMISSIONER

## TOWN OF SURFSIDE, FLORIDA

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

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

26	Signature: <u>[Signature]</u>	Date: <u>10/29/15</u>	Voters Reg. # <u>954 871 8324</u>
	Print Name: <u>Naomi Puzo-Robinson</u>	Address: <u>[Address]</u>	
27	Signature: <u>[Signature]</u>	Date: <u>10-28-15</u>	Voters Reg. # <u>305 331 9605</u>
	Print Name: <u>Dr. Paul S. Doran, MD</u>	Address: <u>[Address]</u>	
28	Signature: <u>[Signature]</u>	Date: <u>10-28-15</u>	Voters Reg. # <u>917-239-7002</u>
	Print Name: <u>MARK SCHNEIDER</u>	Address: <u>[Address]</u>	<u>BI05 FL</u>
29	Signature: <u>[Signature]</u>	Date: <u>10-28-2015</u>	Voters Reg. # <u>[Number]</u>
	Print Name: <u>MARIA PEREZ-BOAN</u>	Address: <u>[Address]</u>	<u>AN</u>
	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: _____	
	Signature: _____	Date: _____	Voters Reg. # _____
	Print Name: _____	Address: _____	

### STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 3 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: [Signature]  
Address of Circulator: 9056 Bay Dr  
Email address of Circulator: barry@barrycohenlawfirm.com

### ACCEPTANCE OF NOMINATION

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

Signature of Candidate: [Signature] Date: 10/28/15

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

### NOMINATING PETITION FOR MAYOR OR COMMISSIONER

### TOWN OF SURFSIDE, FLORIDA

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

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

Signature: <u>Elaine Harari</u>	Date: <u>12/2/15</u>	Voters Reg. # <u>7867978182</u>
Print Name: <u>Elaine Harari</u>	Address: <u>1111</u>	
Signature: <u>Jacky Yeroshalmy</u>	Date: <u>12/4/15</u>	Voters Reg. # <u>1111</u>
Print Name: <u>Jacky Yeroshalmy</u>	Address: <u>1111</u>	
Signature: <u>Daniel Gielchinsky</u>	Date: <u>12/5/15</u>	Voters Reg. # <u>3057638708</u>
Print Name: <u>Daniel Gielchinsky</u>	Address: <u>1111</u>	
Signature: <u>Keith Brian Rolfe</u>	Date: <u>12/16/15</u>	Voters Reg. # <u>3054846049</u>
Print Name: <u>Keith Brian Rolfe</u>	Address: <u>1</u>	
Signature: <u>Caraloln</u>	Date: <u>12/16/15</u>	Voters Reg. # <u>305-542-9099</u>
Print Name: <u>CARA ROLFE</u>	Address: <u>1</u>	
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: _____	

#### STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 5 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: Barry Cohen  
Address of Circulator: 9056 Bay Dr, Surfside  
Email address of Circulator: \_\_\_\_\_

#### ACCEPTANCE OF NOMINATION

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

Signature of Candidate: [Signature] Date: 12/7/15



**TOWN OF SURFSIDE**  
**Office of the Town Clerk**

MUNICIPAL BUILDING  
9293 HARDING AVENUE  
SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra Novoa, MMC, Town Clerk

December 10, 2015

Mr. Barry Cohen  
9056 Bay Drive  
Surfside, FL 33154

Dear Mr. Cohen:

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

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

Very truly yours,

Sandra Novoa, MMC  
Town Clerk

# CAMPAIGN TREASURER'S REPORT SUMMARY

**OFFICE USE ONLY**

12 5P12:33 RC

12-10 12:32 *pk*

(1) Barry Cohen  
 Name

(2) 9056 Bay Drive  
 Address (number and street)

Surfside, Florida 33154  
 City, State, Zip Code

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

**(5) Report Identifiers**

Cover Period: From 11 / 01 / 2015 To 11 / 30 / 2015 Report Type: TR

Original       Amendment       Special Election Report

**(6) Contributions This Report**

Cash & Checks      \$ \_\_\_\_\_ , \_\_\_\_\_ , 200.00

Loans      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

In-Kind      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

**(7) Expenditures This Report**

Monetary Expenditures      \$ \_\_\_\_\_ , \_\_\_\_\_ , 25.00

Transfers to Office Account      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

**(8) Other Distributions**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , 200.00

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , 25.00

**(11) Certification**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

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

(Type name) \_\_\_\_\_

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

**X** \_\_\_\_\_

Signature

(Type name) \_\_\_\_\_

Candidate       Chairperson (only for PC and PTY)

**X** \_\_\_\_\_

Signature



# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name BARRY COHEN (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
11 / 24 / 2015 +	Edward E. Kopelman 8925 Collins Avenue #6 Surfside, FL 33154	I	Business ma	CHE			\$50.00
11 / 13 / 2015 +	Charles Citrin 300 71st Street Miami Beach, FL 33141	I	Lawyer	CHE			\$100.00
11 / 18 / 2015 +	Edward E. Kopelman 8925 Collins Avenue #6 Surfside, FL 33154	I	Business ma	CHE			\$50.00
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11 / 23 / 2015	Town Of Surfside 9293 Harding Avenue Surfside, Florida 33154	Qualifying Fee	CAN		\$25.00

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



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street) 9056 Bay Drive

City, State, Zip Code Surfside, FL 33154

CHECK IF ADDRESS HAS CHANGED

12-10-15 P 12:33

*pk*

Candidate for:

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

REPORT IDENTIFIERS

Report Name \_\_\_\_\_ Cover Period 11/1/15 through 11/30/15

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen  
(Type name)  Treasurer  Deputy Treasurer

**X**

Signature

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

Barry Cohen  
(Type name)  Candidate

**X**

Signature

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



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

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_  
(3) Report Name \_\_\_\_\_ (4) Cover Period 11/1/15 through 11/30/15  
(5) Report Type  Original  Amendment (6) Page 1 of 1

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

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)  
Surfside, Florida 33154

City, State, Zip Code

Check here if address has changed

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

12-10-15 P04:17 RCVD *sen*

## (5) Report Identifiers

Cover Period: From 11 / 01 / 2015 To 11 / 30 / 2015 Report Type: \_\_\_\_\_

Original

Amendment

Special Election Report

### (6) Contributions This Report

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

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 200. 00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 25. 00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 950. 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 25. 00

## (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) BARRY COHEN  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X  
Signature

(Type name) BARRY COHEN  
 Candidate  Chairperson (only for PC and PTY)

X  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name BARRY COHEN (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
11 / 24 / 2015 +	Edward E. Kopelman 8925 Collins Avenue #6 Surfside, FL 33154	I	Business ma	CHE			\$50.00
11 / 13 / 2015 +	Charles Citrin 300 71st Street Miami Beach, FL 33141	I	Lawyer	CHE			\$100.00
11 / 18 / 2015 +	Edward E. Kopelman 8925 Collins Avenue #6 Surfside, FL 33154	I	Business ma	CHE			\$50.00
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name BARRY COHEN

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11 / 23 / 2015	Town of Surfside 9293 Harding Avenue Surfside, FL 33154	Qualifying Fee	CAN	Yes	\$25.00
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

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



OFFICE USE ONLY

Name

Barry Cohen

I.D. Number

Address (number and street)

9056 Bay Drive

City, State, Zip Code

Surfside, FL 33154

CHECK IF ADDRESS HAS CHANGED

12-10-15P04:18 RCVD *SN*

Candidate for:

Mayor

Commissioner, District \_\_\_\_\_

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area \_\_\_\_\_, Sub-Area \_\_\_\_\_

REPORT IDENTIFIERS

Report Name \_\_\_\_\_

Cover Period 11/1/15 through 11/30/15

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen

(Type name)  Treasurer  Deputy Treasurer

**X**

Signature

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

Barry Cohen

(Type name)  Candidate

**X**

Signature





## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)

Surfside, Florida 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

OFFICE USE ONLY

01-11-16 P04:42 RCVD *gjn*

### (5) Report Identifiers

Cover Period: From 12 / 01 / 2015 To 12 / 31 / 2015 Report Type: Dec 2015

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,   5   ,  500  .  00 

Loans \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

In-Kind \$        ,        ,        .       

### (7) Expenditures This Report

Monetary Expenditures \$        ,        ,  00  .  00 

Transfers to Office Account \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

### (8) Other Distributions

\$        ,        ,        .       

### (9) TOTAL Monetary Contributions To Date

\$        ,   6   ,  450  .  00 

### (10) TOTAL Monetary Expenditures To Date

\$        ,        ,  25  .  00 

### (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) Barry Cohen

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

**X**

Signature

(Type name) Barry Cohen

Candidate  Chairperson (only for PC and PTY)

**X**

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 15 (4) Page 1 of 2

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
12 / 09 / 15	1	McDowell, Carter N. 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 09 / 15	2	Bilzin, Brian L. 1450 Bricekl1 Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 09 / 15	3	Goldstein, Richard M. 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 09 / 15	4	Mora, Minday A. 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$100.00
12 / 09 / 15	5	Price, Stanley B 6000 Island Blvd. #807 Aventura, FL 33160	I	Lawyer	CHE			\$300.00
12 / 09 / 15	6	Lear, Steven 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 29 / 15	7	Green, Shaya B 1286 President Street Brooklyn, NY 11213	I	Lawyer	CHE			1000.00

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 15 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
12 / 29 / 15 8	Kasdin, Neisen One SE Third Avenue 25th Floor Miami, Florida 33131	I	Lawyer	CHE			\$500.00
12 / 29 / 15 9	9316 Collins Ave LLC 3921 Alton Road Suite 138 Miami Beach, FL 33140	B	Real Estate	CHE			\$1,000.00
12 / 29 / 15 10	Boymelgreen, Mendy 535 Dean Street #130 Brooklyn, NY 11217	I	Real Estate	CHE			\$1,000.00
12 / 29 / 15 11	Caton Owner, LLC 3921 Alton Road Suite 138 Miami Beach, FL 33140	B	Real Estate	CHE			\$1,000.00
/ /							
/ /							
/ /							
/ /							

01-11-16 P04:42 RCVD *slm*

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

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

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

None

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



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street)  
9056 Bay Drive

City, State, Zip Code  
Surfside, Florida 33154

CHECK IF ADDRESS HAS CHANGED

01-11-16P04:43 RCVD *skn*

Candidate for:

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

REPORT IDENTIFIERS

Report Name Dec, 2015 Cover Period 12/01/2015 through 12/31/2015

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen  
(Type name)  Treasurer  Deputy Treasurer

**X**  
[Signature]  
Signature

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

Barry Cohen  
(Type name)  Candidate

**X**  
[Signature]  
Signature



## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen  
 Name  
9056 Bay Drive  
 Address (number and street)  
Surfside, FL 33154  
 City, State, Zip Code

OFFICE USE ONLY

TOWN OF SURFSIDE

FEB9'16 03:56PM

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate    Office Sought: Commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO)     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 01 / 01 / 2016 To 01 / 31 / 2016 Report Type: 01/2016

Original     Amendment     Special Election Report

### (6) Contributions This Report

Cash & Checks    \$ \_\_\_\_\_ , \_\_\_\_\_ , 100.00

Loans    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures    \$ \_\_\_\_\_ , \_\_\_\_\_ , 00.00

Transfers to Office Account    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary    \$ \_\_\_\_\_ , \_\_\_\_\_ , 00.00

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 6,550.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 25.00

### (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) Barry Cohen

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

**X** \_\_\_\_\_  
 Signature

(Type name) Barry Cohen

Candidate     Chairperson (only for PC and PTY)

**X** \_\_\_\_\_  
 Signature



## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 01 / 01 / 2016 through 01 / 31 / 2016 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
01 / 29 / 16 1	Louis Cohen 9341 Collins Avenue #1008 Surfside, FL 33154	I	Business Ma	Check			100.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 01 / 01 / 2016 through 01 / 31 / 2016

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

None

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



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street)  
9056 Bay Drive

City, State, Zip Code  
Surfside, FL 33154

CHECK IF ADDRESS HAS CHANGED

TOWN OF SURFSIDE

FEB9'16 03:57PM

Candidate for:

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

REPORT IDENTIFIERS

Report Name January 2016 Cover Period 01/01/2016 through 01/31/2016

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name)  Treasurer  Deputy Treasurer

**X**

Signature

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

(Type name)  Candidate

**X**

Signature

PAID CAMPAIGN WORKERS PARTICIPATING  
IN ABSENTEE BALLOT ACTIVITIES



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

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Report Name January 2016 (4) Cover Period 01/01/2016 through 01/31/2016

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

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

*None*

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)

Surfside, Florida 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

TOWN OF SURFSIDE

FEB 19 16 12:29 PM

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

### (5) Report Identifiers

Cover Period: From 12 / 01 / 2015 To 12 / 31 / 2015 Report Type: DEC 15

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,   7   ,   490   .   00  

Loans \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

In-Kind \$        ,        ,        .       

### (7) Expenditures This Report

Monetary Expenditures \$        ,        ,   00   .   00  

Transfers to Office Account \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

### (8) Other Distributions

\$        ,        ,        .       

### (9) TOTAL Monetary Contributions To Date

\$        ,   8   ,   415   .   00  

### (10) TOTAL Monetary Expenditures To Date

\$        ,        ,   25   .   00  

### (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) Barry Cohen

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

**X**

Signature

(Type name) Barry Cohen

Candidate  Campaign (only for PC and PTY)

**X**

Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 15 (4) Page 1 of 2

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
12 / 09 / 15	1	McDowell, Carter N. 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 09 / 15	2	Bilzin, Brian L. 1450 Bricekll Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 09 / 15	3	Goldstein, Richard M. 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 09 / 15	4	Mora, Minday A. 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$100.00
12 / 09 / 15	5	Price, Stanley B 6000 Island Blvd. #807 Aventura, FL 33160	I	Lawyer	CHE			\$300.00
12 / 09 / 15	6	Lear, Steven 1450 Brickell Avenue Suite 2300 Miami, FL 33131	I	Lawyer	CHE			\$150.00
12 / 29 / 15	7	Green, Shaya B 1286 President Street Brooklyn, NY 11213	I	Lawyer	CHE			1000.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

FEB19'16 12:29PM

TOWN OF SURFSIDE

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 12 / 01 / 15 through 12 / 31 / 15 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
12 / 29 / 15 8	Kasdin, Neisen One SE Third Avenue 25th Floor Miami, Florida 33131	I	Lawyer	CHE			\$500.00
12 / 29 / 15 9	9316 Collins Ave LLC 3921 Alton Road Suite 138 Miami Beach, FL 33140	B	Real Estate	CHE			\$1,000.00
12 / 29 / 15 10	Boymelgreen, Mendy 535 Dean Street #130 Brooklyn, NY 11217	I	Real Estate	CHE			\$1,000.00
12 / 29 / 15 11	Caton Owner, LLC 3921 Alton Road Suite 138 Miami Beach, FL 33140	B	Real Estate	CHE			\$1,000.00
12 / 16 / 15 12	Mitch Permuy 400 Beach Drive St. Petersburg, FL 33701	I	Business ma	CHE	ADD		\$995.00
12 / 16 / 15 13	Roberto Jimenez 565 Solando Prado Coral Gables, FL 33156	I	Craftsman	CHE	ADD		\$995.00
/ /							

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



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street)  
9056 Bay Drive

City, State, Zip Code  
Surfside, Florida 33154

CHECK IF ADDRESS HAS CHANGED

Candidate for:

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

REPORT IDENTIFIERS

Report Name DECEMBER 2015 Cover Period 12/01/2015 through 12/31/2015

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen  
(Type name)  Treasurer  Deputy Treasurer

**X**

Signature

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

Barry Cohen  
(Type name)  Candidate

**X**

Signature



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



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

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Report Name December 2015 (4) Cover Period 12/01/2015 through 12/31/2015

(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

*None*

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen  
Name

(2) 9056 Bay Drive  
Address (number and street)

Surfside, FL 33154  
City, State, Zip Code

OFFICE USE ONLY

TOWN OF SURFSIDE

FEB9'16 03:56PM

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate    Office Sought: Commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO)     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 01 / 01 / 2016 To 01 / 31 / 2016 Report Type: 01/2016

Original     Amendment     Special Election Report

### (6) Contributions This Report

Cash & Checks    \$ \_\_\_\_\_ , \_\_\_\_\_ , 100.00

Loans    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures    \$ \_\_\_\_\_ , \_\_\_\_\_ , 00.00

Transfers to Office Account    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary    \$ \_\_\_\_\_ , \_\_\_\_\_ , 00.00

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 6,550.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 25.00

### (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) Barry Cohen

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

X

Signature \_\_\_\_\_

(Type name) Barry Cohen

Candidate     Chairperson (only for PC and PTY)

X

Signature \_\_\_\_\_

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 01 / 01 / 2016 through 01 / 31 / 2016 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
01 / 29 / 16 1	Louis Cohen 9341 Collins Avenue #1008 Surfside, FL 33154	I	Business Ma	Check			100.00
/ /							
/ /							
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/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 01 / 01 / 2016 through 01 / 31 / 2016

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /					
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/ /					
/ /					

None

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



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street)  
9056 Bay Drive

City, State, Zip Code  
Surfside, FL 33154

TOWN OF SURFSIDE

FEB9'16 03:57PM

CHECK IF ADDRESS HAS CHANGED

Candidate for:

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

REPORT IDENTIFIERS

Report Name January 2016 Cover Period 01/01/2016 through 01/31/2016

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name)  Treasurer  Deputy Treasurer

**X**

Signature

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

(Type name)  Candidate

**X**

Signature

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



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

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_  
 (3) Report Name January 2016 (4) Cover Period 01/01/2016 through 01/31/2016  
 (5) Report Type  Original  Amendment (6) Page 1 of 1

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

*None*

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

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):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

**OFFICE USE ONLY**

FEB 19 2016 12:31 PM  
TOWN OF SURFSIDE

### (5) Report Identifiers

Cover Period: From 02 / 01 / 2016 To 02 / 12 / 2016 Report Type: 02/2016

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 496. 00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 1, 343. 50

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 1, 343. 50

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 8, 911. 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 1, 368. 00

### (11) Certification

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

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

(Type name) Barry Cohen  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X  
Signature

(Type name) Barry Cohen  
 Candidate  Chairperson (only for PC and PTY)

X  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 02 / 01 / 2016 through 02 / 12 / 2016 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
02 / 9 / 16 1	Steven Dunn, PA 1135 Kane Concourse Bay Harbor Isl, FL 33154	I	Lawyer	Check			360.00
02 / 02 / 16 2	Keith London, Inc. 613 Oleander Dr. Hallandale, FL 33009	I	Business ma	Check			136.00
/ /							
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 02 / 01 / 2016 through 02 / 12 / 2016

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
02 / 01 / 2016  1	Blue Print Consulting P.O. Box 310561 Miami, FL 33231	Campaign Consulting	CAN		\$1,000.00
02 / 02 / 2016  2	Miami Dade Elections Department 2700 NW 87th Avenue Miami, Florida 33172	Campaign Research	CAN		43.00
02 / 08 / 2016  3	Mitchel Worley 1123 sw 1st ave, apt #3 Gainesville, FL, 32601	Campaign Photos	CAN		\$300.00

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



OFFICE USE ONLY

Name

BARRY COHEN

I.D. Number

Address (number and street)

9056 BAY DRIVE

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 \_\_\_\_\_, Sub-Area \_\_\_\_\_

REPORT IDENTIFIERS

Report Name FEBRUARY 2016 Cover Period 02/01/2016 through 02/12/2016

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

BARRY COHEN

(Type name)

Treasurer

Deputy Treasurer

**X**

Signature

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

BARRY COHEN

(Type name)

Candidate

**X**

Signature

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



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

(1) Name BARRY COHEN (2) I.D. Number \_\_\_\_\_

(3) Report Name FEBRUARY 2016 (4) Cover Period 02/01/2016 through 02/12/2016

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

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

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)

Surfside, Florida 33154

City, State, Zip Code

Check here if address has changed

(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

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

03-04-16P12:42 RCVD

## (5) Report Identifiers

Cover Period: From 02 / 13 / 2016 To 02 / 26 / 2016 Report Type: Feb 2016

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 500. 00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , 7 , 543. 45

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 9 , 411. 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 8 , 911. 95

## (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) Barry Cohen

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

X  
Signature

(Type name) Barry Cohen

Candidate  Chairperson (only for PC and PTY)

X  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 02 / 13 / 2016 through 02 / 26 / 2016 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
02 / 16 / 2016 / /  2016 1	Elias Sussman 6565 Collins Avenue Miami Beach, FL 33141	I	Business Man	CHE			\$500.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 02 / 13 / 2016 through 02 / 26 / 2016

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
02 / 18 / 2016 +	Physical Advertising Works P.O. Box 370366 Miami, FL 33137-0366	Yard Signs	Mon		\$619.00
1					
02 / 18 / 2016 +	Physical Advertising Works P.O. Box 370366 Miami, FL 33137-0366	Yard Sign Stands	Mon		\$52.97
2					
02 / 18 / 2016 +	MDW Communications LLC 601 N.W. 82nd Avenue Plantation, FL 33324	Campaign Literature	Mon		\$2,000.00
3					
02 / 18 / 2016 +	Blueprint Consulting LLC P.O. Box 310561 Miami, FL 33231	Consulting Website Hosting Website Domain	Mon & RMB		\$1,041.00
4					
02 / 22 / 2016 +	MDW Communications LLC 601 N.W. 82nd Avenue Plantation, FL 33324	Direct Mail & Consulting	Mon		\$2,800.00
5					
02 / 22 / 2016 +	Blueprint Consulting LLC P.O. Box 310561 Miami, FL 33231	Consulting Data Management	Mon		\$1,030.00
6					

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



OFFICE USE ONLY

Name Barry Cohen

I.D. Number \_\_\_\_\_

Address (number and street)  
9056 Bay Drive

City, State, Zip Code  
Surfside, Florida 33154

CHECK IF ADDRESS HAS CHANGED

03-04-16 P12:42 RCVD

Candidate for:

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

REPORT IDENTIFIERS

Report Name Feb 13-26 2016 Cover Period 02/13/2016 through 02/26/2016

Report Type  Original  Amendment

CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen

(Type name)  Treasurer  Deputy Treasurer

**X**

Signature

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

Barry Cohen

(Type name)  Candidate

**X**

Signature

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



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

(1) Name \_\_\_\_\_ (2) I.D. Number \_\_\_\_\_

(3) Report Name \_\_\_\_\_ (4) Cover Period \_\_\_\_\_ through \_\_\_\_\_

(5) Report 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

*None*



## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Barry Cohen

Name

(2) 9056 Bay Drive

Address (number and street)

Surfside, Florida, 33154

City, State, Zip Code

Check here if address has changed

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

03-11-16P02:36 RCVD

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

### (5) Report Identifiers

Cover Period: From 02 / 27 / 2016 To 03 / 10 / 2016 Report Type: March 2016

4 DAYS PRIOR

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,   2   ,  130  .  00 

Loans \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

In-Kind \$        ,        ,        .       

### (7) Expenditures This Report

Monetary Expenditures \$        ,        ,  563  .  48 

Transfers to Office Account \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

### (8) Other Distributions

\$        ,        ,        .       

### (9) TOTAL Monetary Contributions To Date

\$        ,  11  ,  541  .  00 

### (10) TOTAL Monetary Expenditures To Date

\$        ,   9  ,  475  .  43 

### (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) Barry Cohen

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

**X**

Signature

(Type name) Barry Cohen

Candidate  Chairperson (only for PC and PTY)

**X**

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barry Cohen (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 02 / 27 / 2016 through 03 / 10 / 2016 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
03 / 01 / 2016 1	Robin Banks 209 N. Birch Road Unit 501 Ft. Lauderdale FL 33301	I	Marketing	Che			\$1,000.00
03 / 07 / 2016 2	Karyn Cunningham 13985 S.W. 72nd Ct. Palmetto Bay, FL 33158	I	Councilwoman	Che			\$250.00
03 / 08 / 2016 3	Jeffrey Bercow 200 South Biscayne Blvd. Suite 850 Miami, FL 33131	I	Attorney	Che			\$500.00
03 / 08 / 2016 4	9460 Restaurant Partners, LLC 9462 Harding Avenue Surfside, FL 33154	B	Restaurant	Che			\$180.00
03 / 09 / 2016 5	Mark Sheridan 1108 Kane Concourse #307 Bay Harbor Isl, FL 33154	I	Financial Ad	Che			\$100.00
03 / 10 / 2016 6	Surfside Legacy LLC 1691 Michigan Avenue, Ste 360 Miami Beach, FL 33139	B	Financial	Che			\$100.00
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barry Cohen

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 02 / 27 / 2016 through 03 / 10 / 2016

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
03 / 01 / 2016 +	Vital Graphics 2131 W. 60th Street Hialeah, FL 33016		Signs		444.05
1					
03 / 03 / 2016 +	Angela Lopez 17839 N.W. 63 Court Hialeah, FL 33015		RMB		\$119.43
2					

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



OFFICE USE ONLY

Name

Barry Cohen

I.D. Number

Address (number and street)

9056 Bay Drive

City, State, Zip Code

Surfside, FL 33154

CHECK IF ADDRESS HAS CHANGED

03-11-16P02:36 RCVD

Candidate for:

Mayor

Commissioner, District Surfside

Property Appraiser

Clerk of the Circuit Courts

Community Council, Area \_\_\_\_\_, Sub-Area \_\_\_\_\_

**4 DAYS PRIOR** REPORT IDENTIFIERS

Report Name March 2016 Cover Period 02/27/2016 through 03/10/2016

Report Type  Original  Amendment

**CERTIFICATION**

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

Barry Cohen

(Type name)

Treasurer

Deputy Treasurer

X

Signature

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

Barry Cohen

(Type name)

Candidate

X

Signature

