STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

10-16-15 15:02 yell

| I, Daniel Edward Dietch , | | | |
|--|--|--|--|
| candidate for the office of Mayor ; | | | |
| have been provided access to read and understand the requirements of | | | |
| Chapter 106, Florida Statutes. | | | |
| | | | |
| | | | |
| | | | |
| X October 14, 2015 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)

10-16-15 15:02 PK

NOTE: This form must be on file with the qualifying OFFICE USE ONLY officer before opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): ☐ Depository Office Party Re-filing to Change: Treasurer/Deputy Initial Filing of Form X 3. Address (include post office box or street, city, state, zip 2. Name of Candidate (in this order: First, Middle, Last) **Daniel Edward Dietch** 9372 Byron Avenue 4. Telephone 5. E-mail address Surfside, FL 33154 ded4@cornell.edu (305) 298-6568 7. If a candidate for a nonpartisan office, check if 6. Office sought (include district, circuit, group number) applicable: Mayor 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 Party candidate. Write-In **Deputy Treasurer** Campaign Treasurer 9. I have appointed the following person to act as my X 10. Name of Treasurer or Deputy Treasurer Staci Shanahan 12. Telephone 11. Mailing Address 9234 Bay Drive (786) 269-5797 17. E-mail address 15. State 16. Zip Code 13. City 14. County FL 33154 staciks@gmail.com Miami-Dade Surfside ▼ Primary Depository Secondary Depository 18. I have designated the following bank as my 20. Address 19. Name of Bank 9525 Harding Avenue Citibank 24. Zip Code 23. State 21. City 22. County FI 33154 Surfside Miami-Dade 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. 26. Signature of Candidate 25. Date October 14, 2015 Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) 27. Staci Shanahan , do hereby accept the appointment (Please Print or Type Name) Campaign Treasurer Deputy Treasurer. designated above as: |X|October 14, 2015 Signature of Campaign Treasurer or Deputy Treasurer Date

| | CAMPAIGN TREASURER'S REPORT SUMMARY | | | | |
|---|---|---|--|--|--|
| (1) | Daniel Dietch | OFFICE USE ONLY | | | |
| \'- | Name | | | | |
| (2) | 9372 Byron Avenue | | | | |
| | Address (number and street) Surfside, FL 33154 | NOV10715 9:31AM | | | |
| | City, State, Zip Code | TOWN OF SURFSIDE | | | |
| | Check here if address has changed | (3) ID Number: NOV10715 9:31AM | | | |
| (4) | Check appropriate box(es): | | | | |
| | ☑ Candidate Office Sought: Mayor | | | | |
| | ☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO) | ☐ Check here if PC or ECO has disbanded | | | |
| | Party Executive Committee (PTY) | ☐ Check here if PTY has disbanded | | | |
| | ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) | ☐ Check here if no other IE or EC reports will be filed | | | |
| | | | | | |
| | (5) Report | | | | |
| Cov | er Period: From $10 / 01 / 15$ To | 10 / 31 / 15 Report Type: October 2015 | | | |
| ✓C | Priginal ☐ Amendment ☐ Spe | cial Election Report | | | |
| (6) | Contributions This Report | (7) Expenditures This Report | | | |
| Cas | h & Checks \$, , 000 | Monetary Expenditures \$,, _0.00 | | | |
| Loai | s,, <u>100</u> . <u>00</u> | Transfers to Office Account \$, , 0.00 | | | |
| Tota | Monetary \$,, <u>10</u> 0. <u>00</u> | Total Monetary \$, 0.00 | | | |
| In-K | ind \$, , 0 . <u>00</u> | | | | |
| | | (8) Other Distributions \$, , 0 . 00 | | | |
| | | \$, , <u>0</u> . <u>00</u> | | | |
| (9) | TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | |
| | \$, <u>100</u> . <u>00</u> | \$, , <u>0</u> . <u>00</u> | | | |
| (11) Certification | | | | | |
| It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) | | | | | |
| 1 | I certify that I have examined this report and it is true, correct, and complete: | | | | |
| _(7 | _{ype name)} Staci Shanahan | (Type name) Daniel Dietch | | | |
| | Individual (only for IE | ☑ Candidate ☐ Chairperson (only for PC and PTY) | | | |
| X | Jan V Though | x Q | | | |
| S | ignature | Signature | | | |

| (1) Name | l Dietch | | (2) | I.D. Number | | |
|------------------------------|--|-------------------------------------|-------------------------------|--------------------------------|----------|----------|
| (3) Cover Period | 1 10 / 01 / 15 | through 10 / | ³¹ / ¹⁵ | _ (4) Page | <u> </u> | of |
| (5) Date (6) Sequence Number | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor Type Occupation | (9) Contribution Type | (10) In-kind Description | (11) | (12) |
| 10 26 15 / / / | Daniel Dietch 9372 Byron Avenue Surfside, FL 33154 | S Consultant | LOA | Bessription | | \$100.00 |
| <u> </u> | | | | | | |
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DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

| (3) Cover Period 10 / 01 / 15 through 10 / 31 / 15 (4) Page 1 of 1 | | | | | |
|--|--|--|----------------------------|------|---------------|
| (5) Date (6) Sequence Number | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add office sought if contribution to a candidate) | (9) Expenditure Type | (10) | (11) Amoun |
| N/A | N/A | N/A | N/A | N/A | N/A |
| / / | | | | | |
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



| | OFFICE USE ONLY | | | |
|---|---|--|--|--|
| Name Daniel Dietch | | | | |
| | | | | |
| I.D. Number | | | | |
| | TOWN OF SURFSIDE | | | |
| Address (number and street) | NOV1075 9:31AM | | | |
| 9372 Byron Avenue | | | | |
| City, State, Zip Code | | | | |
| Surfside, FL 33154 | | | | |
| ☐ CHECK IF ADDRESS HAS CHANGED | | | | |
| Candidate for: | | | | |
| I ∀ i № | | | | |
| ☑ Mayor | | | | |
| ☐ Commissioner, District | - | | | |
| ☐ Property Appraiser ☐ Clerk of the Circuit Courts | | | | |
| ☐ Community Council, Area, Su | h-Area | | | |
| | | | | |
| REPORT IDE | NTIFIERS | | | |
| Report Name October 2015 Cover Period 10/01/15 through 10/31/15 | | | | |
| Report Type 😡 Original 🔲 Amendment | | | | |
| CERTIF | ICATION | | | |
| It is a first degree misdemeanor for any pers | son to falsify a public record (ss. 839.13, F.S.) | | | |
| I certify that I have examined this report and it is true, correct, and complete. | I certify that I have examined this report and it is true, correct, and complete. | | | |
| Staci Shanahan | | | | |
| (Type name) Treasurer Deputy Treasurer | (Type name) | | | |
| | | | | |
| X tac L. Nevahar | X De | | | |
| 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) NameDaniel Dietch (2) I.D. Number | | | | | | |
|---------------------------------------|---|--------------------|---------------|--|---------------------------|--|
| (3) Report I | Name October 2015 | (4) Cover Period | 1_10/01/15 | through <u>10/3</u> | 1/15 | |
| (5) Report ⁻ | Type ☐ Original ☐ Amendment | (6) Page1_ | | of1 | of1 | |
| (7) Row Number | (8) Full Name (Last, Suffix, First, Middle) | (9) Employed By | Name of Orgar | (10) nization Employed By hired by campaign) | (11) Amendment Type | |
| N/A | N/A | N/A | N/A | | N/A | |
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CANDIDATE OATH -NONPARTISAN OFFICE

12-04-15P02:06 RCVD SM

(Not for use by Judicial or **School Board Candidates)**

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

| I, Daniel Dietch | ON THE DALLOT * NAME | MAY NOT BE QUANCED AFTER THE EN | D OF CHALEWING |
|--|---|--|--|
| (PLEASE PRINT NAME AS YOU WISH IT TO APPEAR | ON THE BALLOT NAME | MAY NOT BE CHANGED AFTER THE EN | D OF QUALIFYING) |
| am a candidate for the nonpartisan office of | Mayor | | ,, |
| | | (office) | (district #) |
| (circuit #) (group or seat #) | qualified elector of M | liami-Dade | County, Florida; |
| | | | |
| I am qualified under the Constitution and the elected; I have qualified for no other public concurrent with the office I seek; and I have Section 99.012, Florida Statutes; and I will s State of Florida. | office in the state, to resigned from any off | the term of which office or an fice from which I am required to | y part thereof runs or resign pursuant to |
| X Jaran | (305)298-6568 | ded4@cornell.edu | |
| Signature of Candidate | Telephone Number | Email Addre | ess |
| | | | |
| 9372 Byron Avenue Surfsi | ide | FL | 33154 |
| Address City | | State | ZIP Code |
| | | | |
| Candidate's Florida Voter Registration Numb | er (located on your vote | r information card): 109960487 | 7 |
| * Please print name phonetically on the line be with disabilities (see instructions on page 2 of | | be pronounced on the audio b | allot for persons |
| Dan-ee-el Die-tch | | | |
| STATE OF FLORIDA | | | |
| COUNTY OF Miami-Dade | | | |
| The part of | | 10.00 B 10.40 | |
| Sworn to (or affirmed) and subscribed bef | ore me this / (0 | day of October | _, 20 <u>_15</u> |
| | | | |
| Personally Known: or | | Signature of Notary Public | |
| Produced Identification: | | Print, Type, or Stamp Commissioned | d Name of Notary Public |
| | | | |
| Type of Identification Produced: | | Notary Public - My Comm. Expi | DLDSTEIN State of Florida res Jul 17, 2016 # EE 217155 |
| DO DE 05 (D 5/44) | | Bonded Through Na | ational Notary Assn. |
| DS-DE 25 (Rev. 5/11) | | | Rule 15-2.000 , F.A.C. |



TOWN OF SURFSIDE

MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154

GENERAL ELECTION – MARCH 15, 2016

SWORN STATEMENT OF QUALIFICATION

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

| | STATE OF FLORIDA } |
|---|--|
| | COUNTY OF MIAMI-DADE } |
| | TOWN OF SURFSIDE } I solemnly swear (or affirm) under oath, that my name is |
| | am a Citizen of the United States, a qualified elector of Miami Dade County and the Town of Surfside, |
|) | Florida; that my address is 9272 Byon Avenue, 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 December 17, 2015 and that if elected, I will willingly serve as |
| | (Mayor or Commissioner) of the Town of Surfside, if elected. |
| | Signature of Candidate Date |
| | Sworn to and subscribed before me this |
| | SANDRA NOVOA MY COMMISSION # FF 187423 EXPIRES: May 4, 2019 NOTARY PUBLIC SCHOOL NOVO PRINTED NAME OF NOTARY |

Bonded Thru Notary Public Underwriters

| | urfside, Florida, hereby nominate <u>Daniel Dietch</u> f |
|--|--|
| the office of <u>Mayor</u> 2016. | (Mayor or Commissioner) at an election to be held on March 15 |
| 2016. | |
| This petition must be filed with the Town Clerk not | t more than fifty-five and not less than thirty five days prior to the election. |
| Signature: | Date: <u>/ 1 ~ 7 ~ / 5</u> Voters Reg. # |
| Print Name: James Shanaha | |
| Signature: Tack Manalan | Date: 4-9-15 Voters Reg. # |
| Print Name: Stacik Shanahan | Address: |
| Signature: | Date: \\\ 26'15 Voters Reg. # |
| Print Name: Dava Kulun | Address: |
| Signature: 4944 | Date: 1/2/15 Voters Reg. # |
| Print Name: Daniel Deth | Address: |
| Signature: | Date: 11/28/15 Voters Reg. # |
| Print Name: Thris Tughy | Address: |
| Signature: Anule 12 (18 | Date: Voters Reg. # |
| Print Name: Iddhill Im 1. 10015 | Address: |
| Signature: Of May Do Usua | Date://-> 9 Voters Reg. # |
| Print Name () yda () e (L.S. mas | |
| Signature: <u>frank & alle</u> | Date: |
| Print Name: AlcAND De Alm | Address: |
| Signature: | Date: 1 \ 29 \ \S Voters Reg. # |
| Print Name: Sharon 6011 be | Yy Address: |
| Signature: Ash Samuhe | Date: 11/2 9 1 / 5 Voters Règ. # |
| rint Name: earth Gendler | Address: |
| ignature: | Date:Voters Reg. # |
| rint Name: Rich Finlinson | Address: |
| ignature: | Date: 1\\29\\5_ Voters Reg. # |
| rint Name: Sharon Fillinson | |
| ignature: Candete Selicio | |
| rint Name: Claudate Schiero. | 1) Address: |
| STATE | EMENT OF CIRCULATOR |
| he undersigned is the circulator of the foregoing par as made in my presence and is the genuine signatu | per containing $\frac{\chi}{\chi}$ signatures. Each signature appended thereto ure of the person whose name it purports to be. |
| ignature of Circulator: | |
| ddress of Circulator: 9372 Bynn Avin | in Sortside Pt 33157 |
| mail address of Circulator: | ardy e (orad) elu |
| ACCEP nereby accept the nomination of <u>Mayor</u> | TANCE OF NOMINATION (Mayor or Commissioner) and agree to |
| ignature of Candidate: | Date: 12/4/15 |
| | Date: 12/4/15 |

| tside, Florida, hereby nomir | late <u>DANIEL DIETUH</u> | fo |
|----------------------------------|---|---|
| (Mayor or Commissione | r) at an election to be held on | March 15, |
| | | |
| more than fifty-five and not les | s than thirty five days prior to the | election. |
| Date: //-2 | 9 - 15 Voters Reg. # | |
| Address: | Water I Marie | |
| Date: 0 + 1 | Voters Reg. # | |
| Kett Address: | | 2 () |
| Date: <u>///29/</u> | Voters Reg. # | |
| Address: | | |
| Date: 11/2° | 7/15_Voters Reg. # | |
| Address: | 12011 700 | |
| Date: 11 29 | 15_ Voters Reg. # | |
| Address: | 12-211112 | |
| Date: <u>///29//</u> / | Voters Reg. # | |
| Address: | | |
| Date: <u> -) 9 - </u> | Voters Reg. # | |
| Address: 62.12 | | |
| Date: <u>// -) 9</u> | Voters Reg. # | |
| Address: | · · · · · · · · · · · · · · · · · · · | |
| Date: <u>1 \ 2</u> | 7 - SVoters Reg. # | |
| Address: | | |
| Date: <u> 1 - 2 9</u> | -/ <u>S</u> Voters Reg. # | |
| Address: | | |
| Date: | Voters Reg. # | |
| Address: | | |
| Date: | Voters Reg. # | |
| Address: | | |
| Date: | Voters Reg. # | |
| Address: | | |
| MENT OF CIRCULATOR | | |
| er containing lə sigi | natures. Each signature apper | nded thereto |
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| ALP CHILD THEY | | |
| du 1100, 500 15117 | | _ |
| ANCE OF NOMINATION | | |
| | _ (Mayor or Commissioner) ar | nd agree to |
| | - Date: 12/4/15 5M | V |
| | Date: 29 Address: Date: 29 Address: | Address: Date: 11/29/15 Voters Reg. # Address: Date: 11/29/15 Voters Reg. # Address: Date: 11/29/15 Voters Reg. # Address: Date: 11/29/2015 Voters Reg. # Address: Date: 11/29/2015 Voters Reg. # Address: Date: 11/29/2015 Voters Reg. # Address: Date: 11/29/15 Voters Reg. # Address: 11/29/15 Voters Reg. # |

| | • | ors of the Town of Surfsic | | | | for |
|------------------|----------------------|-----------------------------|----------------------|-----------------------|--|--|
| the office of | Mayor | | (Mayor or Comi | missioner) at a | n election to be held o | on March 15, |
| 2016. | | | | | | |
| This pe | tition must be filed | with the Town Clerk not mor | e than fifty-five ar | nd not less than | thirty five days prior to t | he election. |
| r | | | | | | 01/6-4// |
| Signature: | Farbara | when | _ Date: | 11-18-13 | Voters Reg. # / & | 7490046 |
| Print Name: | BARBARA | CAHEN | Address: | J | Allow the second se | |
| Signature: | som A | Caleen | Date: | 11-18-15 | Voters Reg. # 10 | >9490045 |
| Print Name: | Lovis A. C | HEN | Address: | | | William Inches |
| Signature: | TONI STI | ANSKY | Date: | 11-18-15 | _,Voters Reg. # | |
| Print Name: | TON! S | transky | Address: | anti-mapataka apatama | | |
| Signature: | Citytheat | Rente | Date: | 11/19/15 | Voters Reg. # | |
| Print Name: | Anthi | Lepouter | Address: | _ | | |
| Signature: | I atu | A Roman | Date: | 11/20/15 | Voters Reg. # | |
| Print Name: | SANDERI | Herow | Address: | "A /i-r. | /// | , |
| Signature: | Elaine | Killer | Date: | 11/201/5 | Voters Reg. # | |
| Print Name: | Elaina | Killeen | Address: | | | |
| Signature: | Mi Och 80 | UKCo | Date: | 11/20/1 | Voters Reg. # | |
| Print Name: | Mark S | latko | Address: | | | |
| Signature: | alla | Senono | Date: | 11 23 13 | Yoters Reg. # | |
| Print Name: | ZoilA | BENEVERA | Address: | 12: 4 11 4 170 | - N - | |
| Signature: | TUJILBI | Visman) | | 11/23/15 | Voters Reg. # | |
| Print Name: | JUDITH 3 | ISMAN | Address: | | | |
| Signature: | | . Mayork True | | 11-23-15 | Voters Reg. # <i>3</i> | ro 4 |
| Print Name: | | Yaxock Tricom | | | | |
| Signature: | Rus the | Zi o Lizi | | | Voters Reg. # | A STATE OF THE STA |
| Print Name: | Derothy | 1. Keber #70 | | 1 | | 1 12 /-/ |
| Signature: | Local D. | E Ladon 30 | | W/23/10 | _ Voters Reg. # | |
| Print Name: | Leonalla | E LADDEA | Address: | 3. / - | | |
| Signature: | a delaida | · P. Labure | Date: | 11/23/15 | Voters Reg. # | |
| Print Name: | AlElAINA | P. LADAGA | Address: | 82 | r | 1 . 81 |
| I filit (Valife. | NUGIIIUA | | 7,001000. | <u></u> | | / |
| | | STATEME | NT OF CIRCUI | LATOR | | |
| | | or of the foregoing paper | | | es. Each signature a _l | ppended thereto |
| was made in | my presence and | is the genuine signature | of the person w | hose name it p | urports to be. | |
| Signature of | Circulator: | Estera (or | htm | | 0 | |
| Address of C | | 3341 Collins | Arres | 41008 | Surfacede | FL 33154 |
| | ss of Circulator: | 100bar 1008 B | grail. | lom | | |
| I banalessas | | | NCE OF NOMI | | avor or Commissions | or) and agree to |
| nereby acce | ept the nomination | Mayor | | | ayor or Commissione | i) allu agree to |
| Signature of | Candidate: | alana | | | Date: 12/4/17 | _ |
| | | | | 12-04-13P0 | 22:65 ROVO | 4 1 |

| the office of | ~ | (Mayor or Commissioner) at an election to be held on March 15, |
|---------------------------|--|--|
| 2016. | | (Mayor or commoderate) at all closulon to be held on |
| This petiti | tion must be filed with the Town Clerk not m | nore than fifty-five and not less than thirty five days prior to the election. |
| Signature: | Morane | Date: 1/ - 23 Voters Reg. # |
| Print Name: | NORA BAEN | |
| Signature: | Min Ca NOW | Date: 1124-15 Voters Reg. # |
| Print Name: _ | 1 505 Sing Levi Son | Address: Address: |
| Signature: 🍕 | Ze derenous | Date: 11-27-15 Voters Reg. # |
| Print Name: 🗜 | BERNARDO LEDERMAN | Address: ',_, |
| Signature: | porra de Le Sume | Date: 21/2-Voters Reg. # |
| Print Name: | BASIA LEDEROLAN | Address: |
| Signature: _ | In Clickan | Date: 1/30/15 Voters Regr# |
| Print Name: | ANA BHACHA | R Address: |
| Signature: | Jam sluvi | Date: 1//3 0//5 Voters Reg. # |
| Print Name: | Jacobo B Lachin | Address: 8 |
| Signature: _ | 9000 | Date: _///3c/ Voters Reg. # |
| Print Name: | EVELYNE OFFICHE | Address: |
| Signature: | forma for waya | Date: 1/20/15 Voters Reg. # |
| Print Name: | WORMA SOMOZA | |
| Signature: _ | The state of the s | Date: // Syst//S_Voters Reg. # |
| Print Name: | GVARGE JUHOZA | |
| Signature: Print Name: | Boathiz FerNANDEZ | |
| Signature: | CONTROL STATE OF THE PARTY OF T | Date: 11/30/15 Voters Reg. # |
| Print Name: | Miguel Fernand | |
| Signature: | 7/1 | Date: 1130 15 Voters Reg. # |
| Print Name: | FRENDY CHICHE | Address: |
| Signature: | Clumns | Date: /2.1 2011 Voters Reg. # |
| Print Name: _ | Slunt pasont | Address: |
| | STATEN | MENT OF CIRCULATOR |
| The undersigne | ed is the circulator of the foregoing paper | er containing <u>'</u> signatures. Each signature appended thereto |
| was made in m | ny presence and is the genuine signatur | re of the person whose name it purports to be. |
| Signature of Ci | irculator: Destara | hrm |
| Address of Circ | F. 1 //: | Avenue \$ 1008 Surfails, 71 33154 |
| Email address | of Circulator: /oubar 1008' | y your. Con |
| I hereby accen | ACCEPT. of the nomination of <u>Mayor</u> | FAN ©E OF NOMINATION (Mayor or Commissioner) and agree to |
| • | | |
| Signature of Ca | andidate: | Date: 12/4/15 |
| | | 12-04-15 P07:06 RCVD |

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.

| 1, Duniel Dictal | , a candidate for the office of |
|-------------------------------------|--|
| Mayor | , 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 authori | ty to decide whether said candidate has violated the mandatory |
| campaign practices and, if a violat | tion 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
- willfully injury, 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.

| aca | 12/4/15 | | |
|-----------|---------|--|--|
| Signature | Date | | |

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.
- 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.
- 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.
- I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

| 1, Duniel Dietch | , a candidate for the office of | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| , 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 prev | ious page and recognize as compulsory the | | | | | | | |
| jurisdiction of the Ethics Commission. I furthe | r 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 irre- | vocable for the duration of the campaign. | | | | | | | |
| 1000 | 12/4/10 | | | | | | | |
| Signature | Date | | | | | | | |
| PLEASE FILE FORM(S) WITH THE MIAMI-PUBLIC TRUST AND THE MIAMI-DADE S | | | | | | | | |
| Miami-Dade Commission on Ethics | Miami-Dade Supervisor of Elections | | | | | | | |
| 19 West Flagler Street Suite 220 | 2700 N.W. 87th Avenue | | | | | | | |
| Miami, FL 33130 | Doral, Florida 33172 | | | | | | | |
| | New P.O. Box #: | | | | | | | |
| | P.O.Box 521550 | | | | | | | |
| | Miami, Florida 33152-1550 | | | | | | | |
| | | | | | | | | |
| For further information contact Miami D | Dade Elections Department, Public | | | | | | | |
| Services at 305-499-8400 | | | | | | | | |



MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863 Sandra Novoa, MMC, Town Clerk

December 8, 2015

Mr. Daniel Dietch 9372 Byron Avenue Surfside, Fl 33154

Dear Mr. Dietch:

I am pleased to inform you that according to records on file in this office, you have qualified as a candidate for the Office of Mayor 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 🗘

| CAMPAIGN TREASURE | CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| (1) Daniel Dietch | OFFICE USE ONLY | | | | | | | | |
| Name | | | | | | | | | |
| 9372 Byron Avenue | | | | | | | | | |
| Address (number and street) Surfside, FL 33154 | 12-09-15 A 10:13 RCVD SO | | | | | | | | |
| City, State, Zip Code | | | | | | | | | |
| Check here if address has changed | (3) ID Number: | | | | | | | | |
| (4) Check appropriate box(es): | | | | | | | | | |
| ✓ Candidate Office Sought: Mayor | | | | | | | | | |
| Political Committee (PC) | | | | | | | | | |
| ☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY) | ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded | | | | | | | | |
| ☐ Independent Expenditure (IE) (also covers an | ☐ Check here if no other IE or EC reports will be filed | | | | | | | | |
| individual making electioneering communications) | | | | | | | | | |
| (5) Report | Identifiers | | | | | | | | |
| Cover Period: From 11 / 01 / 15 To | 11 / 30 / 15 Report Type: November 2015 | | | | | | | | |
| ✓ Original | ecial Election Report | | | | | | | | |
| (6) Contributions This Report | (7) Expenditures This Report | | | | | | | | |
| 450 00 | Monetary | | | | | | | | |
| Cash & Checks \$, , 15000 | Expenditures \$, , 0 . 00 | | | | | | | | |
| Loans \$, , 0.00 | Transfers to | | | | | | | | |
| | Office Account \$, , 0.00 | | | | | | | | |
| Total Monetary \$, , _15000 | | | | | | | | | |
| <u> </u> | Total Monetary \$, , 0 . 00 | | | | | | | | |
| In-Kind \$, , 000 | (0) | | | | | | | | |
| | (8) Other Distributions \$, 0 . 00 | | | | | | | | |
| | ,, | | | | | | | | |
| (9) TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | | | | | | |
| \$, , <u>250</u> . <u>00</u> | \$, , <u>0</u> . <u>00</u> | | | | | | | | |
| (11) Cer | tification | | | | | | | | |
| It is a first degree misdemeanor for any pers | on to falsify a public record (ss. 839.13, F.S.) | | | | | | | | |
| I certify that I have examined this report and it is true, cor | | | | | | | | | |
| (Type name) Staci Shanahan | (Type name) Daniel Dietch | | | | | | | | |
| ☐ Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer or electioneering comm.) | ☑ Candidate ☐ Chairperson (only for PC and PTY) | | | | | | | | |
| the state of the s | | | | | | | | | |
| x face man | X | | | | | | | | |
| Signature | Signature | | | | | | | | |

| (1) Name | l Dietch | | | (2) | I.D. Number | | |
|------------------------|--|-------|---------------------|--------------------|-------------|-----------|----------|
| (3) Cover Period | // | throu | gh / | 30 / 15 | _ (4) Page | | of |
| (5) Date (6) Sequence | (7) Full Name (Last, Suffix, First, Middle) Street Address & | | (8) | (9) | (10) | (11) | (12) |
| Number 11 5 15 / / 1 | City, State, Zip Code Ted Kopelman 8925 Collins Avenue Aprtment 6F Surfside, FL 33154 | Туре | Occupation Retired | Туре сне | Description | Alleidner | \$50.00 |
| 11 5 15 2 | Barbara Cohen 9341 Collins Avenue Surfside, FL 33154 | I | Retired | СНЕ | | | \$100.00 |
| I I | | | | | | | |
| 1 1 | | | | | | | |
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| 1 1 | | | | | | | |
| 1 1 | | | | | | | |

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name Danie | l Dietch | | (2) I.D. Number | · | |
|------------------------------|---|--|----------------------------|------|-------------|
| (3) Cover Perio | d <u>11 / 01 / 15</u> through | 11 / 30 / 15 | (4) Page | of _ | 1 |
| (5) Date (6) Sequence Number | (7) Full Name (Last, Suffix, First, Middle Street Address & City, State, Zip Code | (8) Purpose e) (add office sought contribution to a candidate) | (9) Expenditure Type | (10) | (11) |
| N/A / / | N/A | N/A | N/A | N/A | N/A |
| / / | | | | | |
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



| | OFFICE USE ONLY |
|---|---|
| Name | |
| Daniel Dietch | |
| I.D. Number | |
| Address (number and street) 9372 Byron Avenue | 12-09-15 A10:13 RCVD SUN |
| 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, Sul | - A |
| Li Community Council, Area, Sui | J-Area |
| REPORT IDE | NTIFIERS |
| Report Name November 2015 Cover Period | 11/01/15 through 11/30/15 |
| Report Type 🛛 Original 🔲 Amendment | |
| CERTIFI | 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. | I certify that I have examined this report and it is true, correct, and complete. |
| Staci_Shanahan | |
| X Accid Javahar Signature | X Signature |

PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES



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

| (1) Name _ | Daniel Dietch | | | (2) I.D. Number | | |
|-------------------------|---|--------------------|------------------|--|---------------------------|--|
| (3) Report N | Name November 2015 | (4) Cover Period | 11/01/15 | through <u>11/30/15</u> | | |
| (5) Report ⁻ | Type ☑ Original ☐ Amendment | (6) Page1 | | of1 | | |
| (7) Row Number | (8) Full Name (Last, Suffix, First, Middle) | (9) Employed By | Name of Organiza | l0) ation Employed By red by campaign) | (11) Amendment Type | |
| N/A | N/A | N/A | N/A | | N/A | |
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| | CAMPAIGN TREASURE | R'S REPORT SUMMARY |
|------|---|---|
| (1) | Daniel Dietch | OFFICE USE ONLY |
| | Name | |
| (2) | 9372 Byron Avenue | 01-08-16 A11:37 RCVD 940 |
| | 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: Mayor | |
| | ☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO) | Check here if PC or ECO has disbanded |
| | ☐ Party Executive Committee (PTY) | Check here if PTY has disbanded |
| | Independent Expenditure (IE) (also covers an individual making electioneering communications) | Check here if no other IE or EC reports will be filed |
| | | |
| _ | | Identifiers |
| | | 12 / 31 / 15 Report Type: December 2015 |
| ✓ C | riginal Amendment Spe | ecial Election Report |
| (6) | Contributions This Report | (7) Expenditures This Report |
| Cas | h & Checks \$, , _95000 | Monetary Expenditures \$, , 45. 00 |
| Loar | s , , , 0 .00 | Transfers to Office Account \$, , 0.00 |
| Tota | l Monetary \$, , <u>95</u> 0. <u>00</u> | Total Monetary \$, 45. 00 |
| In-K | ind \$, , 0 . <u>00</u> | , |
| | | (8) Other Distributions |
| | | \$ |
| (9) | TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date |
| | \$ | \$, , <u>45</u> . <u>00</u> |
| | (11) Cer | tification |
| | It is a first degree misdemeanor for any pers | on to falsify a public record (ss. 839.13, F.S.) |
| 1. | certify that I have examined this report and it is true, corr | |
| _(7 | _{Type name)} Staci Shanahan | _(Type name) Daniel Dietch |
| | Individual (only for IE Treasurer Deputy Treasurer electioneering comm.) | ☑ Candidate ☐ Chairperson (only for PC and PTY) |
| X | Slacikstanda | x Face |
| - | ignature | Signature |

| (1) Name | Daniel | Dietch | | | | | | (2) I.D | . Number | | | |
|-------------|--------|-----------------|----|---|---------|-----------------|-----------------|---------|----------|---|----|---|
| (3) Cover P | eriod | ¹² / | 01 | / | through | ¹² / | ³¹ / | 15 | (4) Page | 1 | of | _ |

| (7) Full Name | | (8) | (9) | (10) | (11) | (12) |
|--|---|---|--|--|---|--|
| (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Contributor Type Occupation | | Contribution Type | In-kind Description | Amendment | Amount |
| Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 | I | Retired | СНЕ | | | \$100.00 |
| Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 | I | Editor | СНЕ | | | \$100.00 |
| Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 | ı | Retired | СНЕ | | | \$250.00 |
| Stephen Kulvin 13611 Deering Bay Drive, Sienna Building, #202 Coral Gables, FL 33158 | I | Retired | СНЕ | | | \$500.00 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 Stephen Kulvin 13611 Deering Bay Drive, Sienna Building, #202 | Full Name (Last, Suffix, First, Middle) Street Address & Comment City, State, Zip Code Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 Stephen Kulvin 13611 Deering Bay Drive, Sienna Building, #202 | Full Name (Last, Suffix, First, Middle) Street Address & Contributor City, State, Zip Code Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 Stephen Kulvin 13611 Deering Bay Drive, Sienna Building, #202 I Retired | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 I Retired CHE Stephen Kulvin 13611 Deering Bay Drive, Sienma Building, #202 I Retired CHE COntribution Type Contribution Type Contributor Type Contributor Type Contributor Type ChE | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 Stephen Kulvin 13611 Deering Bay Drive, Sienna Building, #202 I Setired Contribution Type ChE | Full Name (Last, Suffix, First, Middle) Street Address & Contributor City, State, Zip Code Loretta Dietch 7647 Southhampton Terrace, #408 Tamarac, FL 33321 Magda Hernandez 51 Landseer Street West Roxbury, MA 02132 I Editor CHE Douglas Myers 955 Massachussetts Avenue, #342 Cambridge, MA 02139 I Retired CHE Stephen Kulvin 13611 Deering Bay Drive, Sienna Building, #202 I Retired CHE Contribution Type Contribution Type Contribution Type Contribution Type Che CHE |

DS-DE 13 (Rev. 11/13)



CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name Daniel Dietch | | | | | | (2) I.D. Number | |
|------------------------|------|------|------------|-----------------|-----------------|-----------------------|-----------------|
| (3) Cover Period 12 | / 01 | / 15 | through 12 | / ³¹ | / ¹⁵ | (4) Page ¹ | of ¹ |

| (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 |
| 12 /04 / 15 | Town of Surfside 9293 Harding Avenue Surfside, FL 33154 | N/A | MON | N/A | \$25.00 |
| 12 / 14 / 15 | Miami-Dade Elections 2700 NW 87th Avenue Miami, FL 33172 | N/A | MON | N/A | \$20.00 |
| // | | | | | |
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



| | OFFICE USE ONLY |
|---|--|
| Name Daniel Dietek | |
| Daniel Dietch | — |
| I.D. Number | |
| | 01-03-16ATT:38 RCVD SWN |
| Address (number and street) | * |
| 9372 Byron Avenue | |
| City, State, Zip Code | |
| Surfside, FL 33154 | |
| ☐ CHECK IF ADDRESS HAS CHANGED | |
| CHECK IF ADDRESS HAS CHANGED | |
| Candidate for: | |
| | |
| ☑ Mayor | |
| ☐ Commissioner, District | _ |
| ☐ Property Appraiser | |
| ☐ Clerk of the Circuit Courts | |
| ☐ Community Council, Area, Su | b-Area |
| REPORT IDE | NTIFIERS |
| December 2015 | 40/04/45 40/04/45 |
| Report Name December 2015 Cover Period | 1 12/01/15 through 12/31/15 |
| Report Type 🖾 Original 🔲 Amendment | |
| | |
| | ICATION |
| | on to falsify a public record (ss. 839.13, F.S.) I certify that I have examined this report and it is true, |
| I certify that I have examined this report and it is true, correct, and complete. | correct, and complete. |
| | David Dietek |
| Staci_Shanahan (Type name) | |
| | |
| Joë VA a da | |
| X wet much | Xanco |
| 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 Dietch | | (2) I.D. Number | |
|----------------------|---|--------------------|---|---------------------------|
| (3) Report | Name December 2015 | (4) Cover Period | | 31/15 |
| (5) Report | Type ☑ Original ☐ Amendment | (6) Page1 | of1 | |
| (7) Row Number | (8) Full Name (Last, Suffix, First, Middle) | (9) Employed By | (10) Name of Organization Employed By (if not directly hired by campaign) | (11) Amendment Type |
| N/A | N/A | N/A | N/A | N/A |
| | | | | |
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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 officer before opening the campaign account.

JAN29716 10:48AM

TOWN OF SURFSIDE

OFFICE USE ONLY

| officer before opening the | Cumpa | gir account. | | _ | | | | Total party law and a | 40-110-170-7 | 01110 | _ 00_ | - |
|---|-------------------------|------------------------------------|--|-----------|--------------------------|------------------------|-----------|-----------------------|--------------|-----------------|----------|-------|
| 1. CHECK APPROPRIATE Initial Filing of Form | | 6): filing to Change: | X T | reası | urer/D | eputy [|] Depo: | sitory | | Office | | Party |
| 2. Name of Candidate (in | his order | : First, Middle, La | ast) | 3 | 3. Add | ress (includ | le post c | office bo | x or s | treet, city, | state, z | zip |
| Daniel Edward Dietch | | | | | code) | | | | | | | |
| 4. Telephone | 5. E-ma | il address | | | | Byron Ave de, FL 33 | | | | | | |
| (305) 298-6568 | ded4@ | cornell.edu | | | <i>,</i> (11) | uo, 1 L 00 | 101 | | | | | |
| 6. Office sought (include of | listrict, ci | rcuit, group numb | oer) | | | 7. If a cand | | or a <u>no</u> i | nparti | isan office | e, chec | k if |
| Mayor | | | | | | applicab | | ent is to | run a | s a Write-I | n candi | date. |
| 8. If a candidate for a part | isan offi | ce, check block | and fill | in n | ame o | of party as | applica | ble: N | /ly inte | ent is to ru | n as a | |
| ☐ Write-In ☐ No I | Party Affi | liation | | | | | | | _ Pa | rty can | didate. | |
| 9. I have appointed the fo | llowing | person to act as | my | | Cam | paign Treas | surer | | Deput | y Treasure | er | |
| 10. Name of Treasurer or Daniel Dietch | eputy Tr | easurer | | | | | | | | | | |
| 11. Mailing Address | | | | | | and the second | | 12. | Telep | ohone | | |
| 9372 Byron Avenue | | | | | | | | (3 | 305 | 298-65 | 68 | |
| 13. City | 14. C | ounty | 15. Sta | ate | 16. | Zip Code | 17. E-r | nail add | dress | | | - 150 |
| Surfside | Mian | ni-Dade | FL | | 331 | 54 | ded4@ | @corn | ell.ec | lu | | |
| 18. I have designated the | followin | g bank as my | Σ | | Primar | y Depositor | У | Sec | conda | ry Deposit | ory | |
| 19. Name of Bank | | | | 20. | Addre | ess | | | | | | |
| Citibank | | | | 952 | 5 Ha | rding Ave | enue | | | | | |
| 21. City | | 22. County | | | | 23. State | | | | 24. Zip C | ode | |
| Surfside | | Miami-Dade | | | an and the second second | FL | | | | 33154 | | |
| UNDER PENALTIES OF PERJU | | ARE THAT I HAVE OF CAMPAIGN DEF | | | | | | | | | EASURE | R AND |
| 25. Date | | | | 26. | Signa | ture of Can | didate | | | | | |
| January 28, 2016 | | | NA STATE OF THE ST | X | 1 | Q | a | | 7 | 41007600 100000 | | |
| 27. Treasure | er's Acce | eptance of Appo | intmen | t (fill i | in the | blanks and | check t | he appr | opriat | e block) | | |
| l, | Property and the second | Daniel Dietch | | | | | , do | hereby | ассер | t the appo | intmen | t |
| | (Pleas | se Print or Type N | vame) | | | | | | | | | |
| designated above as: | | Campaign T | reasure | r | \times | Deputy Tre | asurer. | | | | | |
| January 28 | | | X | | 6 | Dene | ~ | | | | | |
| Date | 9 | | | Sign | nature | of Campaig | gn Treas | surer or | Depu | ty Treasur | er | |

| | CAMPAIGN TREASURE | R'S REPORT SUMMARY |
|------------|---|---|
| (1) | Daniel Dietch | OFFICE USE ONLY |
| | Name | -0 |
| (2) | 9372 Byron Avenue Address (number and street) | 02-09-16A10:04 RCVD 500 |
| | Surfside, FL 33154 | |
| | City, State, Zip Code | |
| | Check here if address has changed | (3) ID Number: |
| (4) | Check appropriate box(es): | |
| | Candidate Office Sought: Mayor | |
| | ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) | ☐ Check here if PC or ECO has disbanded |
| | Party Executive Committee (PTY) | Check here if PTY has disbanded |
| | Independent Expenditure (IE) (also covers an individual making electioneering communications) | Check here if no other IE or EC reports will be filed |
| | (5) Report | Identifiers |
| Cov | 2007 1809 10250 12 10250 12 | 01 / 31 / 16 Report Type: January 2016 |
| √ 0 | riginal Amendment Spe | ecial Election Report |
| | Contributions This Report | (7) Expenditures This Report |
| (0) | Contributions This Report | Monetary |
| Cas | n & Checks \$, 4 , 155 . 00 | Expenditures \$, _1 , 677 . 10 |
| Loar | s , , , , 0 . 00 | Transfers to Office Account \$, , 0.00 |
| Tota | I Monetary \$,4 , <u>155</u> . <u>00</u> | |
| In-K | ind \$, , <u>60</u> . <u>99</u> | Total Monetary \$, _ 1 _, 677 . 10 _ |
| | | (8) Other Distributions |
| | | \$,, 0 . 00 |
| (9) | TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date |
| | \$, 5 , 35500 | \$, <u>1</u> , <u>722</u> . <u>10</u> |
| | (11) Cert | |
| | It is a first degree misdemeanor for any pers | |
| | certify that I have examined this report and it is true, corr | CONSTRUCTOR OF THE PROPERTY CONTRACTOR OF THE PROPERTY OF THE |
| - | ype name) Staci Shanahan | (Type name) Daniel Dietch |
| or | Individual (only for IE | ☑ Candidate ☐ Chairperson (only for PC and PTY) |
| Х | Star La Handla | x Edward |
| - | gnature | Signature |

| (1) Name | el Dietch | l | | | | | (2) 1.0 |). Number | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|-----------------|-----------|-------|---|---------|----|------|---------|-----------|---------|--|
| (3) Cover Perio | d | / | / | through | 01 | 31 / | 16 | (4) Page | 1 Of | f |

| | (5) | (7) | | (8) | (9) | (10) | (11) | (12) |
|---------|---------------------------------|---|------------|--------------------------|----------------------|------------------------|-----------|-----------|
| | Date (6) Sequence Number | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Co Type | ontributor Occupation | Contribution Type | In-kind Description | Amendment | Amount |
| 01 | 04 16 | Gaffin, Hal 60 Edgewater Drive Lanai North Coral Gables, FL 33133 | ı | Businessman | СНЕ | | | \$100.00 |
| 01 | , ⁰⁷ , ¹⁶ | Cypen, Steve P.O. Box 402099 Miami Beach, FL 33140 | В | Lawyer | СНЕ | | | \$1000.00 |
| 01 | , ⁰⁷ , ¹⁶ | Gassman, Leigh 8325 SW 143 Street Miami, FL 33158 | I | Teacher | СНЕ | | | \$150.00 |
| 01 | , ⁰⁷ , 16 | Mahler, Ed 7480 SW 156 Street Palmetto Bay, FL 33157 | I | Retired | СНЕ | | | \$100.00 |
| 01 5 | 08 16 | Mahler, Joan 7480 SW 156 Street Palmetto Bay, PL 33157 | I | Retired | СНЕ | | | \$100.00 |
| 01 6 | 13 16 / / | Shehadeh, Mohd PO Box 162923 Miami, FL 33116 | I | Consultant | СНЕ | | | \$250.00 |
| 7 | 14 16 / / | Schneider, Shelly 4082 Battersea Road Coconut Grove, FL 33133 | I | Retired | СНЕ | | | \$250.00 |

DS-DE 13 (Rev. 11/13)

| (1) Name | Daniel | Dieto | ch | | | | | _ (2 | 2) I.D. Number | - | |
|-------------|--------|-------|------|-----------------|---------|----|------|------|----------------|---|-----------------|
| (3) Cover P | eriod | 01 | / 01 | / ¹⁶ | through | 01 | / 31 | / 16 | (4) Page | 2 | of ⁴ |

| (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 |
| 01 16 / | Glynn, Peter 9940 NW 79th Avenue Hialeah Gardens, FL 33016 | В | Businessman | СНЕ | | | \$250.00 |
| 01 / 20 / | Cohen, Louis 9341 Collins Avenue, #1008 Surfside, FL 33154 | ı | Retired | СНЕ | | | \$100.00 |
| 01 / 20 / | Cohen, Esther 1276 Biscaya Drive Surfside, FL 33154 | ı | Consultant | СНЕ | | | \$100.00 |
| 01 / 20 / | Hinds, Miriam 10 Edgewater Drive Lanai South Coral Gables, FL 33133 | I | Retired | СНЕ | | | \$100.00 |
| 01 20 / | Gilbert, Art 13611 Deering Bay Drive, #PH 282 Coral Gables, FL 33158 | I | Retired | СНЕ | | | \$100.00 |
| 01 22 / | Arnold, Ken 9309 Dickens Drive Surfside, FL 33154 | I | Businessman | СНЕ | | | \$180.00 |
| 01 22 / | Glynn, Polita 1385 Biscaya Drive Surfside, FL 33154 | ı | Program Dire | | | | \$60.99 |

DS-DE 13 (Rev. 11/13)

| (1) | Name | Daniel | Dieto | cn . | | | (2) I.D. Number | | | | | | |
|-------------|---------|--------|-------|------|-----------------|------------|-----------------|------|----------|---|-----------------|--|--|
| (i) italiio | | | | | | | 1.02.01 | | | | | | |
| (3) | Cover F | Period | 01 | / 01 | / ¹⁶ | through 01 | / 31 | / 16 | (4) Page | 3 | of ⁴ | | |

| (5) Date | (7) Full Name | | (8) | (9) | (10) | (11) | (12) |
|---------------------------|--|------------|--------------------------|----------------------|------------------------|-----------|----------|
| (6) Sequence Number | (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Co Type | ontributor Occupation | Contribution Type | In-kind Description | Amendment | Amount |
| 01 23 16 / / | Levison, Brent 8918 Abbott Avenue Surfside, FL 33154 | I | | CAS | | | \$50.00 |
| 01 , 23 , 16 | Stowe, Kenneth PO Box 011723 Miami, FL 33101 | I | Retired | CAS | | | \$100.00 |
| 01 / 23 / 16 | Talesnick, Howard PO Box 546286 Surfside, PL 33154 | I | Retired | CAS | | | \$100.00 |
| 01 / 24 / 16 | Oppenheimer, Martin 9424 Bay Drive Surfside, FL 33154 | I | | CAS | | | \$50.00 |
| 01 24 16 | O'Hagan, Michael 9333 Harding Avenue Surfside, FL 33154 | I | | CAS | | | \$50.00 |
| 01 25 16 | Gottleib, Lee 1060 West Lake Street Hollywood, FL 33019 | ı | | CAS | | | \$25.00 |
| 01 25 16 / / 21 | Winer, Reinaldo 9452 Carlyle Avenue Surfside, FL 33154 | I | | CAS | | | \$50.00 |

DS-DE 13 (Rev. 11/13)

| (1) Name | Daniel | Dietch | | , | | | | (2) 1.1 | D. Number | | |
|-------------|--------|--------|----|---|---------|----|---|---------|-----------|---|----|
| (3) Cover P | eriod | 01 | 01 | / | through | 01 | / | . / | (4) Page | 4 | of |

| (5) | | (7) | T | (8) | (9) | (10) | (11) | (12) |
|-------------|-----------------|--|------|-------------|--------------|-------------|-----------|----------|
| (5) Date | | (7) Full Name | | (6) | (9) | (10) | \''' | (12) |
| (6) | · | (Last, Suffix, First, Middle) | | | | | | |
| Sequenc | æ | Street Address & | C | ontributor | Contribution | In-kind | | |
| Number | | City, State, Zip Code | Туре | Occupation | Туре | Description | Amendment | Amount |
| 01 25 | 16 / | Peck, Jonathan 138 Cypress Street Watertown, MA 02472 | I | | CAS | | | \$25.00 |
| 01 , 25 | / ¹⁶ | Peck, Michael 101 Main Street Chester, CT 06412 | I | Attorney | СНЕ | | | \$100.00 |
| 01 / 29 | / ¹⁶ | Schlesser, Mel 1300 Collins Avenue, Suite 100 Miami Beach, FL 33139 | В | Businessman | СНЕ | | | \$500.00 |
| 01 / 30 | / 16 | Ivory, Chris 9508 Carlyle Avenue Surfside, FL 33154 | I | Sales | СНЕ | | | \$200.00 |
| 01 31 | 16 / | Hart, Tony 8934 Irving Avenue Surfside, FL 33154 | I | Businessman | CAS | | | \$100.00 |
| 01 31 / | 16 / | Moonves, Melissa 1501 NW 90th Street Seattle, WA 98117 | I | Retired | CAS | | | \$25.00 |
| 1 | 1 | | | | | | | |

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

| (1) Name Daniel Diet | ch | | | | | (2) I.D. Number _ | | |
|--------------------------------|------|-----------------|-----------------------|-----------------|-----------------|-----------------------|-----------------|--|
| (3) Cover Period ⁰¹ | / 01 | / ¹⁶ | through ⁰¹ | / ³¹ | / ¹⁶ | (4) Page ¹ | of ¹ | |

| (5) | (7) | (8) | (9) | (10) | (11) |
|--------------------------|---|---|---------------------|-----------|------------|
| Date (6) Sequence Number | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Purpose (add office sought if contribution to a candidate) | Expenditure Type | Amendment | Amount |
| 01 /08 / 16 | Citibank 9525 Harding Avenue Surfside, FL 33154 | Bank Fees | MON | N/A | \$17.00 |
| 01 / 19/16 | Worley, Michael 333 Las Olas Way, CU #1 Fort Lauderdale, FL 33301 | Consultant | мои | N/A | \$1,000.00 |
| 01 / 21 / 16 | G.S.P. Graphic Screenprinting Productions Inc. 1804 Afton Street Houston, TX 77055 | Yard Signs | MON | n/a | \$636.99 |
| 01 31 16 | Anedot PO Box 84314 Baton Rouge, LA 70884 | Processing Fee | MON | N/A | \$23.11 |
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



| OFFICE USE ONLY | | | | | | |
|--|-----|--|--|--|--|--|
| Name | | | | | | |
| Daniel Dietch | | | | | | |
| I.D. Number | | | | | | |
| I.D. Nulliber | | | | | | |
| | | | | | | |
| Address (number and street) 9372 Byron Avenue 02-09-16 A10:05 RCVD | | | | | | |
| | | | | | | |
| 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 January 2016 Cover Period 01/01/16 through 01/31/16 | | | | | | |
| Report Type 🔯 Original 🔲 Amendment | | | | | | |
| The program is a superior of the program is a | | | | | | |
| 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. I certify that I have examined this report and it is true, correct, and complete. | ue, | | | | | |
| | | | | | | |
| Staci Shanahan Daniel Dietch | | | | | | |
| (Type name) | | | | | | |
| | | | | | | |
| X Jaca / Shanahan X /gen | | | | | | |
| 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 Dietch | (2) I.D. Number | | | | |
|---|---|--------------------|---|---------------------------|--|--|
| (3) Report | Name January 2016 | (4) Cover Period | 01/01/16 through 01/3 | | | |
| (5) Report | Type ☑ Original ☐ Amendment | (6) Page1 | of1 | | | |
| (7) Row Number | (8) Full Name (Last, Suffix, First, Middle) | (9) Employed By | (10) Name of Organization Employed By (if not directly hired by campaign) | (11) Amendment Type | | |
| N/A | N/A | N/A | N/A | N/A | | |
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| 12/ | CAMPAIGN TREASURE | R'S REPORT SUMMARY |
|------------|--|---|
| (1) | Daniel Dietch | OFFICE USE ONLY |
| (2) | Name 9372 Byron Avenue Address (number and street) Surfside, FL 33154 | received 2/19/2016 St |
| | City, State, Zip Code | |
| | Check here if address has changed | (3) ID Number: |
| (4) | Check appropriate box(es): Candidate Office Sought: Mayor Political Committee (PC) Electioneering Communications Org. (ECO) 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 <u>02</u> / <u>01</u> / <u>16</u> To | 02 / 12 / 16 Report Type: 25 days prior to General |
| ✓C | riginal Amendment Spe | cial Election Report |
| (6) | Contributions This Report | (7) Expenditures This Report |
| Cas | h & Checks \$, , <u>982</u> . <u>00</u> | Monetary |
| Loai | | Transfers to Office Account \$, , 0.00 |
| | Monetary \$,, 982 . 00 | Total Monetary \$, 3_, 406 . 01 |
| In-K | ind \$, , 0 . <u>00</u> | (8) Other Distributions |
| | | (8) Other Distributions \$, , 0 . 00 |
| (9) | TOTAL Monetary Contributions To Date \$ | (10) TOTAL Monetary Expenditures To Date \$,5 ,1281 |
| | (11) Cert It is a first degree misdemeanor for any pers | rification on to falsify a public record (ss. 839.13, F.S.) |
| L | certify that I have examined this report and it is true, corr | ect, and complete: |
| Τ) | _{'ype name)} Staci Shanahan | (Type name) Daniel Dietch |
| | Individual (only for IE Treasurer Deputy Treasurer electioneering comm.) | ☑ Candidate ☐ Chairperson (only for PC and PTY) |
| Х | tac of herahan | x dec |
| S | ignature | Signature |

| (1) Name | l Dietch | • | (2) | I.D. Number | | |
|----------------------|--|-----------------------------|----------------------|------------------------|-----------|----------|
| (3) Cover Period | 02 / 01 / 16 | through / | 12 / 16 | _ (4) Page | 1 | of |
| (5) Date (6) | (7) Full Name (Last, Suffix, First, Middle) | (8) | (9) | (10) | (11) | (12) |
| Sequence Number | Street Address & City, State, Zip Code | Contributor Type Occupation | Contribution Type | In-kind Description | Amendment | Amount |
| 02 01 16 / / 1 | Kalish, Nedra 60 Edgewater Drive, #9A | I Retired | СНЕ | | | \$150.00 |
| 02 | Jacobs, Richard 6246 SW 99th Terrace Miami, FL 33156 | I Retired | СНЕ | | | \$100.00 |
| 02 / 02 / 16 | London, Keith 613 Oleander Drive Hallandale, FL 33309 | I Consultant | СНЕ | | | \$136.00 |
| 02 | Scherr, Louis 8875 Hawthorne Avenue Surfside, FL 33154 | I | CAS | | | \$10.00 |

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DS-DE 13 (Rev. 11/13)

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Gitzen, Nicole

8867 Dickens Avenue Surfside, FL 33154

Portnoy, WIlliam 151 West 17th Street, #1H

Carroll, Marilyn 9511 Collins Avenue,

Surfside, FL 33154

New York City, NY

10011

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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\$100.00

\$36.00

| (1) Name | 1 Dietch | (2) I.D. Number | | | | | |
|----------------------|---|-----------------|--------------------------|----------------------|------------------------|-----------|----------|
| (3) Cover Period | 02 / 01 / 16 | throu | gh/ | 12 / 16 | _ (4) Page | | of |
| (5) Date (6) | (7) Full Name (Last, Suffix, First, Middle) | | (8) | (9) | (10) | (11) | (12) |
| Sequence Number | Street Address & City, State, Zip Code | Co Type | ontributor Occupation | Contribution Type | In-kind Description | Amendment | Amount |
| 02 10 16 / / 8 | McLaughlin, Barbara 9341 COllins Avenue, #406 Surfside, FL 33154 | I | Retired | СНЕ | | | \$100.00 |
| 02 / 11 / 16 | Castaneda, Sergio 9486 Harding Avenue Surfside, PL 33154 | В | Business Owner | СНЕ | | | \$250.00 |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |
| I I | | | | | | | |
| I I | | | | | | | |

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

| (1) Name Daniel Dietch | (2) I.D. Number |
|---|-------------------|
| (3) Cover Period 02 / 01 / 16 through 02 / 12 / 1 | 6 (4) Page 1 of 1 |

| (5) | (7) | (8) | (9) | (10) | (11) |
|--------------------------|---|---|---------------------|-----------|---------|
| Date (6) Sequence Number | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Purpose (add office sought if contribution to a candidate) | Expenditure Type | Amendment | Amount |
| 02 /09 / 16 | MDW Communications LLC 601 NW 82bd Street, #432 Plantation, FL 33324 | Direct Mail | MON | n/a | \$3,400 |
| 02 / 12 / 16 | Anedot PO Box 84314 Baton Rouge, LA 70884 | Processing Fee | MON | N/A | \$6.01 |
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



| Name Daniel Dietch | OFFICE USE ONLY | | | | |
|---|---|--|--|--|--|
| I.D. Number | | | | | |
| Address (number and street) 9372 Byron Avenue | received | | | | |
| City, State, Zip Code Surfside, FL 33154 | | | | | |
| ☐ CHECK IF ADDRESS HAS CHANGED | | | | | |
| Candidate for: | | | | | |
| | | | | | |
| REPORT IDE | NTIFIERS | | | | |
| Report Name 25 days prior to General Cover Period 02/01/16 through 02/12/16 Report Type 🖾 Original 🗆 Amendment | | | | | |
| CERTIF | ICATION | | | | |
| It is a first degree misdemeanor for any pers | on to falsify a public record (ss. 839.13, F.S.) | | | | |
| I certify that I have examined this report and it is true, correct, and complete. | I certify that I have examined this report and it is true, correct, and complete. | | | | |
| Staci Shanahan (Type name) ☐ Treasurer ☐ Deputy Treasurer | | | | | |
| 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 <u>Daniel Dietch</u> | | | (2) I.D. Number | | | | | |
|-------------------------------|----------------------------------|------------------|--------------------|-----------------|---|---------------------------|--|--|
| (3) Report | Name 25 days p | orior to General | (4) Cover Period | 02/01/16 | through02 | /12/16 | | |
| (5) Report | Type Original | ☐ Amendment | (6) Page1_ | | of1 | | | |
| (7) Row Number | (8 Full N (Last, Suffix, I | lame | (9) Employed By | Name of Organiz | 10) ation Employed B ired by campaign | (11) Amendment Type | | |
| N/A | N/A | | N/A | N/A | | N/A | | |
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| | CAMPAIGN TREASURE | R'S REPORT SUMMARY | | |
|---|--|--|--|--|
| (1) | Daniel Dietch | OFFICE USE ONLY | | |
| (2) | Name 9372 Byron Avenue | TOWN OF SURFSIDE | | |
| (2) | Address (number and street) | MAR276 10:01AM | | |
| | Surfside, FL 33154 | 1111111 | | |
| | City, State, Zip Code | | | |
| | Check here if address has changed | (3) ID Number: | | |
| (4) | Check appropriate box(es): Candidate Office Sought: Mayor | | | |
| | ☐ Candidate Office Sought: IVIAYOF ☐ 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 <u>02</u> / <u>13</u> / <u>16</u> To | 02 / 26 / 16 Report Type: 11 days prior to General | | |
| V 0 | riginal Amendment Spe | ecial Election Report | | |
| (6) | Contributions This Report | (7) Expenditures This Report | | |
| Casl | n & Checks \$,1, <u>175</u> . <u>00</u> | Monetary Expenditures \$,1, 666 . 22 | | |
| Loar | s \$,, <u>0</u> . <u>00</u> | Transfers to Office Account \$, , 0 . 00 | | |
| Tota | I Monetary \$,1, <u>175</u> . <u>00</u> | Total Monetary \$, 1 , 666 . 22 | | |
| In-Ki | nd \$, ,0 . 00 | | | |
| | | (8) Other Distributions | | |
| | | \$, , <u>0</u> . <u>00</u> | | |
| (9) | TOTAL Monetary Contributions To Date \$, 7 , 512 00 | (10) TOTAL Monetary Expenditures To Date \$, 6 , 794 33_ | | |
| | (11) Cert | | | |
| | It is a first degree misdemeanor for any personal state of the state o | | | |
| I certify that I have examined this report and it is true, correct, and complete: | | | | |
| | ype name) Staci Shanahan Individual (only for IE | (Type name) Daniel Dietch ☑ Candidate ☐ Chairperson (only for PC and PTY) | | |
| X | Jace L. Harrichan | X Signature | | |

| (1) Name | l Dietch | | | (2 |) I.D. Number | | |
|---------------------------|--|------------|------------|-------------------------------|------------------------|-----------|------------|
| (3) Cover Period | 02 / 13 / 16 | throu | igh/ | ²⁶ / ¹⁶ | _ (4) Page | 1 | of |
| (5) Date | (7) Full Name | | (8) | (9) | (10) | (11) | (12) |
| (6) Sequence Number | (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Co Type | ontributor | Contribution Type | In-kind Description | Amendment | Amount |
| 02 13 16 / / 1 | Tanoos, Jonathan 9172 Collins Avenue, #303 Surfside, FL 33154 | I | | CAS | · | | \$75.00 |
| 02 / 17 / 16 | Moore, Amanda 1320 N.E. 133rd Street Miami, FL 33161 | I | Teacher | CAS | | | \$1,000.00 |
| 02 / 22 / 16 | Slatko, Mark 8919 Carlyle Avenue Surfside, FL 33154 | I | | CAS | | | \$50.00 |
| 02 | Iacobacci, Richard 9432 Carlyle Avenue Surfside, FL 33154 | I | | СНЕ | | | \$50.00 |
| | | | | | | | |

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name Dani | el Dietch | 1 | | | | | | (2) I.D. Nu | ımber_ | *************************************** |
|-----------------|-----------|------|------|---------|----|------|------|-------------|--------|---|
| (3) Cover Perio | od 02 | , 13 | , 16 | through | 02 | , 26 | , 16 | (A) Page | 1 | a s 1 |

| (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 | |
| 02 /25 / 16 | COMPDEALINGS 2040 NE 163rd Street, #210 North Miami Beach, FL 33162 | Shirts and stickers | MON | N/A | \$625.95 |
| 2 25 16 | MDW Communications LLC 601 NW 82bd Street, #432 Plantation, FL 33324 | Consultant | MON | N/A | \$1,000.00 |
| 26 16 | Anedot PO Box 84314 Baton Rouge, LA 70884 | Processing Fee | MON | N/A | \$40.27 |
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MIAMI-DADE COUNTY ELECTIONS DEPARTMENT PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES SUMMARY



| | OFFICE USE ONLY |
|---|---|
| Name Deniel Distak | |
| Daniel Dietch | TOWN OF SURFSIDE |
| I.D. Number | DC 863 VOI |
| | MAR2716 10:01AM |
| Address (number and street) | |
| Address (number and street) 9372 Byron Avenue | 0 |
| 9372 Byron Avenue | |
| City, State, Zip Code | |
| Surfside, FL 33154 | |
| ☐ CHECK IF ADDRESS HAS CHANGED | |
| | |
| Candidate for: | |
| | |
| ☑ Mayor | |
| ☐ Commissioner, District | |
| ☐ Property Appraiser | |
| ☐ Clerk of the Circuit Courts | |
| ☐ Community Council, Area, Su | h Aroa |
| , Su | D-Alea |
| REPORT IDE | NTIFIERS |
| Report Name 11 days prior to General Cover Period | + 02/13/16 through 02/26/16 |
| Report Name Government | 1 <u>02/13/10</u> through <u>02/23/10</u> |
| Report Type 🖾 Original 🔲 Amendment | |
| | |
| | ICATION |
| | son to falsify a public record (ss. 839.13, F.S.) |
| I certify that I have examined this report and it is true, correct, and complete. | I certify that I have examined this report and it is true, correct, and complete. |
| correct, and complete. | correct, and complete. |
| Staci Shanahan | Daniel Dietch |
| (Type name) | (Type name) |
| | i i |
| V Jan X X a | V |
| A There to the | A Comment |
| 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 Dietch | (2) I.D. Number | | | | | |
|----------------------|---|--------------------|--|-----------------|---------------------------|--|--|
| (3) Report | Name 11 days prior to General | (4) Cover Period | 02/13/16 t | through02/26/16 | | | |
| (5) Report | Type ☑ Original ☐ Amendment | (6) Page1 | 0 | f <u>1</u> | | | |
| (7) Row Number | (8) Full Name (Last, Suffix, First, Middle) | (9) Employed By | (10) Name of Organization (if not directly hired I | | (11) Amendment Type | | |
| N/A | N/A | N/A | N/A | | N/A | | |
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| CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | |
|---|---|---|--|--|--|--|
| (1) | Daniel Dietch | OFFICE USE ONLY | | | | |
| (0) | Name | | | | | |
| (2) | 9372 Byron Avenue Address (number and street) | 03-11-16P02:42 RCVD SU | | | | |
| | Surfside, FL 33154 | | | | | |
| | City, State, Zip Code | | | | | |
| | Check here if address has changed | (3) ID Number: | | | | |
| (4) | Check appropriate box(es): | | | | | |
| | Candidate Office Sought: Mayor | | | | | |
| | ☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO) | ☐ Check here if PC or ECO has disbanded | | | | |
| | ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an | Check here if PTY has disbanded | | | | |
| | individual making electioneering communications) | Check here if no other IE or EC reports will be filed | | | | |
| | (5) Poport | Identifiers | | | | |
| Cov | | 03 / 10 / 16 Report Type: 4 days prior to General | | | | |
| | | ecial Election Report | | | | |
| (6) | Contributions This Report | (7) Expenditures This Report | | | | |
| (0) | Contributions This Report | Monetary | | | | |
| Cash & Checks \$, , _20000 | | Expenditures \$, , 24 . 60 | | | | |
| Loar | s \$,,, <u>0</u> .00 | Transfers to Office Account \$, , 0.00 | | | | |
| Tota | I Monetary \$, , _20000 | Total Monetary \$, 24 . 60 | | | | |
| In-Ki | nd \$,, _0.00 | , , <u>24</u> . <u>00</u> | | | | |
| | | (8) Other Distributions | | | | |
| -components | | \$, <u> </u> | | | | |
| (9) | TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | | |
| | \$, 7 , 71200 | \$, <u>6</u> , <u>818</u> . <u>93</u> | | | | |
| (11) Certification | | | | | | |
| It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) | | | | | | |
| I certify that I have examined this report and it is true, correct, and complete: | | | | | | |
| - | ype name) Staci Shanahan | (Type name) Daniel Dietch | | | | |
| | Individual (only for IE | ☑ Candidate ☐ Chairperson (only for PC and PTY) | | | | |
| _X | Haci L. Thousan | x aca | | | | |
| Si | gnature | Signature | | | | |

| (1) Name | | | | (2) I.D. Number | | | | |
|--------------------|---|-------|--------------------------|----------------------|------------------------|-----------|----------|--|
| (3) Cover Period | 02 / 27 / 16 | throu | gh / | 10 / 16 | _ (4) Page | 1 | of | |
| (5) Date (6) | (7) Full Name (Last, Suffix, First, Middle) | | (8) | (9) | (10) | (11) | (12) | |
| Sequence Number | Street Address & City, State, Zip Code | Type | ontributor Occupation | Contribution Type | In-kind Description | Amendment | Amount | |
| 02 27 16 / / | Lampner, Ann 9281 Emerson Avenue Surfside, FL 33154 | I | Teacher | CAS | | | \$100.00 | |
| 02 | Shanahan, Staci 9234 Bay Drive Surfside, FL 33154 | I | Professor | CAS | | | \$100.00 | |
| 1 1 | | | | | | | | |
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| 1 1 | | | | | | | | |

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

| CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES 1) Name Daniel Dietch (2) I.D. Number (2) I.D. Number | | | | | | | |
|--|--|--|----------------------------|----------------|-------------|--|--|
| (3) Cover Perio | od 02 / 27 / 16 through 03 | / 10 / 16 | 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) Amendment | (11) Amount | | |
| 02 /29 / 16 | Citibank 9525 Harding Avenue Surfside, FL 33154 | Bank Fee | MON | N/A | \$17.00 | | |
| 03 / 10/16 | Anedot PO Box 84314 Baton Rouge, LA 70884 | Processing Fee | MON | N/A | \$7.60 | | |
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DS-DE 14 (Rev. 11/13)

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



| Name Daniel Dietch | OFFICE USE ONLY |
|---|---|
| I.D. Number | |
| Address (number and street) 9372 Byron Avenue | 03-11-16P02:42 RCVD SUN |
| City, State, Zip Code Surfside, FL 33154 | |
| ☐ CHECK IF ADDRESS HAS CHANGED | |
| Candidate for: | |
| | |
| REPORT IDEI | NTIFIERS |
| Report Name 4 days prior to General Cover Period | 02/27/16 through 03/10/16 |
| Report Type 😡 Original 🔲 Amendment | |
| CERTIFI | |
| It is a first degree misdemeanor for any pers 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. |
| Staci_Shanahan | |
| X Hacil Hanchar 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 <u>Daniel Dietch</u> (2) I.D. Nu | | | | | mber | | |
|---|---|---|--|-----------------|---------------------------|--|--|
| (3) Report | Name 4 days prior to General | (4) Cover Period | 02/27/16 th | through03/10/16 | | | |
| (5) Report | Type ☑ Original ☐ Amendment | (6) Page1 | of | · <u>1</u> | | | |
| (7) Row Number | (8) Full Name (Last, Suffix, First, Middle) | (9) Employed By | (10) Name of Organization (if not directly hired b | | (11) Amendment Type | | |
| N/A | N/A | N/A | N/A | | N/A | | |
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