| APPOINTMENT OF CAMPAIGN TREASURER<br>AND DESIGNATION OF CAMPAIGN<br>DEPOSITORY FOR CANDIDATES<br>(Section 106.021(1), F.S.) | NOV 4 AM11:00 SEA   |  |  |
|---|---|--|--|
| (PLEASE PRINT OR TYPE)  |   |  |  |
| NOTE: This form must be on file with the qualifying officer before opening the campaign account.                            | OFFICE USE ONLY   |  |  |
| 1. CHECK APPROPRIATE BOX(ES):<br>Initial Filing of Form Re-filing to Change:  | Treasurer/Deputy 🔲 Depository 🗌 Office 🔲 Party  |  |  |
| 2. Name of Candidate (in this order: First, Middle, Last)   | 3. Address (include post office box or street, city, state, zip   |  |  |
| Shlomo Danzingen  | code) 9000 Handing Ave  |  |  |
| 4. Telephone 5. E-mail address  | Surfside, FL 33154  |  |  |
| (786) 350-9331 danzinger Egmai  | lion  |  |  |
| 6. Office sought (include district, circuit, group number)  | <ol> <li>If a candidate for a <u>nonpartisan</u> office, check if<br/>applicable:</li> </ol>                |  |  |
| Commissioner  | My intent is to run as a Write-In candidate.  |  |  |
| 8. If a candidate for a <u>partisan</u> office, check block and f   | ill in name of party as applicable: My intent is to run as a  |  |  |
| Write-In No Party Affiliation   | Party candidate.  |  |  |
| 9. I have appointed the following person to act as my   | 📝 Campaign Treasurer 🔲 Deputy Treasurer   |  |  |
| 10. Name of Treasurer or Deputy Treasurer   |   |  |  |
| Shlomo Danzinger  |   |  |  |
| 11. Mailing Address<br>9000 Harding Ave   | 12. Telephone<br>(786) 350-9331   |  |  |
| 13. City 14. County 15. S   |   |  |  |
| Burfside Miami-Dade F   |   |  |  |
| 18. I have designated the following bank as my  | Primary Depository Secondary Depository   |  |  |
| 19. Name of Bank  | 20. Address   |  |  |
| 21. City 22. County   | 23. State 24. Zip Code  |  |  |
|   | HE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND<br>RY AND THAT THE FACTS STATED IN IT ARE TRUE. |  |  |
| 25. Date 11-4-19  | 26. Signature of Candidate X  |  |  |
| 27. Treasurer's Acceptance of Appointme   | nt (fill in the blanks and check the appropriate block)   |  |  |
| I,Shlomo Danzing<br>(Please Print or Type Name)   | ♂ ✓ , do hereby accept the appointment  |  |  |
| designated above as: Campaign Treasur   |   |  |  |
| 11-4-19 X   |   |  |  |
| <u>//-4-/9</u> X<br>Date  | Signature of Campaign Treasurer or Deputy Treasurer   |  |  |

OFFICE USE ONLY STATEMENT OF NOV 4 AM11:00 CANDIDATE (Section 106.023, F.S.) (Please print or type) 1, Shlomo Danzinger \_\_\_\_\_ candidate for the office of ComMISSIONEr have been provided access to read and understand the requirements of Chapter 106, Florida Statutes. Х 11-4-19 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).

DS-DE 84 (05/11)

| APPOINTMENT OF CAMPAIGN TREASURER<br>AND DESIGNATION OF CAMPAIGN<br>DEPOSITORY FOR CANDIDATES    | NOV 4 AM 11:00 SHA  |
|--|---|
| (Section 106.021(1), F.S.)   | A   |
| (PLEASE PRINT OR TYPE)   | NOV 13 AM11:00  |
| NOTE: This form must be on file with the qualifying officer before opening the campaign account. | OFFICE USE ONLY   |
|  |   |
|  | reasurer/Deputy Depository Office Party   |
| 2. Name of Candidate (in this order: First, Middle, Last)  | 3. Address (include post office box or street, city, state, zip code)                                   |
| 4. Telephone 5. E-mail address   | 9000 Handing Ave  |
|  | Surfside, FL 33154  |
| (786) 350-9331 danzinger Egmail  |   |
| 6. Office sought (include district, circuit, group number)                                       | 7. If a candidate for a <u>nonpartisan</u> office, check if   |
| Commissioner   | applicable:<br>My intent is to run as a Write-In candidate.   |
| 8. If a candidate for a <u>partisan</u> 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  | 0   |
| 11. Mailing Address  | 12. Telephone   |
| 9000 Harding Ave   | (786)350-9331   |
| 13. City   | ate 16. Zip Code 17. E-mail address   |
| Surfside Miami Dade FL   | - 33154 dauzinger@gmail.com   |
| 18. I have designated the following bank as my   | Y Primary Depository Secondary Depository   |
| 19. Name of Bank<br>IBERIABANK   | 20. Address<br>400 Arthur Godfrey Rd. #102  |
| 21. City<br>Miami Beach Miami-Dag  | 23. State 24. Zip Code  |
| UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THI                                       | E FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND<br>AND THAT THE FACTS STATED IN IT ARE TRUE. |
| 25. Date   | 26. Signature of Candidate  |
| 11-4-19  | X Inhalan   |
| 27. Treasurer's Acceptance of Appointment  | (fill in the blanks and check the appropriate block)  |
|  |   |
| I, <u>Shlomo Danzinge</u><br>(Please Print or Type Name)   | , do hereby accept the appointment  |
| designated above as: Campaign Treasurer  |   |
| 11-4-19 <b>X</b>   | 111 Am  |
|  | Signature of Campaign Treasurer or Deputy Treasurer   |



## TOWN OF SURFSIDE

MUNICIPAL BUILDING 9293 HARDING AVENUE SURFSIDE, FLORIDA 33154

NOV 19 PM 2:12

### **GENERAL ELECTION – MARCH 17, 2020**

### SWORN STATEMENT OF QUALIFICATION

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

### **STATE OF FLORIDA**

### COUNTY OF MIAMI-DADE }

}

}

### **TOWN OF SURFSIDE**

| I solemnly swear (or affirm) under oath, that my name is <u>Shlomo Danzinger</u> ,                      |
|---|
| that I am a Citizen of the United States, a qualified elector of Miami Dade County and the Town of      |
| Surfside, Florida; that my address is 9000 Harding Ave., Surfside FL 33154                              |
| my occupation is <u>Director</u> , User Experience; that I have been                                    |
| a resident of the Town of Surfside since $5/18/2012$ ; that I will be at least twenty-one (21) years of |
| age by November 22, 2019 and that if elected, I will willingly serve as <u>Commissioner</u>             |
| (Mayor or Commissioner) of the Town of Surfside, if elected.  |

Signature of Candidate

Date

Th day of Sworn to and subscribed before me this 2019. NC PUBLIC SANDRA NOVOA IY COMMISSION # GG 293909 EXPIRES: May 4, 2023 Bonded Thru Notary Public Underwi

PRIN

| CANDIDATE OATH –  |   |  |  |  |  |
|---|---|--|--|--|--|
| NONPARTISAN OFFICE  |   |  |  |  |  |
| Do not use this form if a Judicial or School Board Candidate)   |   |  |  |  |  |
| check box <b>only</b> if you are seeking to qualify as a write-in candidate:                                | NOV 19 PM 2:09  |  |  |  |  |
| Write-in candidate  |   |  |  |  |  |
|   | OFFICE USE ONLY   |  |  |  |  |
| Candid  | ate Oath  |  |  |  |  |
|   | (a), Florida Statutes)  |  |  |  |  |
| 1, Shlomo Danzinger   | C   |  |  |  |  |
| (Print name above as you wish it to appear on the ballot<br>hyphen, check box . (See page 2 - Compound Last | . If your last name consists of two or more names but has no<br>Names). No change can be made after the end of qualifying.<br>ballot, the name must be printed above for oath purposes.)  |  |  |  |  |
| am a candidate for the nonpartisan office of  | Commissioner,   |  |  |  |  |
|   | (Office) (District #)   |  |  |  |  |
| (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 |  |  |  |  |
|   | equired 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.   |  |  |  |  |
|   |   |  |  |  |  |
| Candidate's Florida Voter Registration Number (located on y   | our voter information card): <u>118554799</u>   |  |  |  |  |
|   | on the line below as you wish it to be pronounced on the audio<br>ons on page 2 of this form): <i>[Not applicable to write-in candidates.]</i><br>Mg-guhr   |  |  |  |  |
| × Mb fin 1786 350-9   | 331 danzinger@gmail.com<br>Email Address  |  |  |  |  |
| Signature of Candidate Telephone Number   |   |  |  |  |  |
| <u>9000 Harding Ave</u> Surfside<br>Address City  | FL <u>33154</u><br>State ZIP Code   |  |  |  |  |
| STATE OF FLORIDA  |   |  |  |  |  |
| COUNTY OF Miami-Dade  | Signature of Notary Public  |  |  |  |  |
|   |   |  |  |  |  |
| Sworn to (or affirmed) and subscribed before me this 194  | SANDRA NOVOA  |  |  |  |  |
| ay of <u>November</u> , 20 <u>19</u> .  | EXPIRES: May 4, 2023  |  |  |  |  |
| Personally Known: or Produced Identification:   | Bonded Thru Notary Public Underwritera  |  |  |  |  |
| Type of Identification Produced:  |   |  |  |  |  |
| DS-DE 302NP (Rev. 11/17)  | Rule 1S-2.0001, F.A.C.  |  |  |  |  |

| FORM 1 STATEMENT OF   |   |                                   |   | 2018   |
|---|---|-----------------------------------|---|--|
| Please print or type your name, mailing<br>address, agency name, and position below             | Please print or type your name, mailing<br>address, agency name, and position below: FINANCIAL INTERESTS  |                                   |   |  |
| LAST NAME FIRST NAME MIDE<br>Danzinger<br>MAILING ADDRESS :                                     |   |                                   |   |  |
|   | Harding Ave.  |                                   |   | NOV 19 PM 2:09   |
| CITY: Surfside  | ZIP: COUNTY:<br>33154 Mic   | unii-Dade                         |   |  |
| NAME OF AGENCY :<br><u> Town</u><br>NAME OF OFFICE OR POSITION H                                | of Surfside<br>ELD OR SOUGHT :  |                                   |   |  |
|   | ommissioner   |                                   |   |  |
| CHECK ONLY IF CANDIDATE   | lines on this form. Attach additional she<br>OR INEW EMPLOYEE OF  |                                   |   |  |
| DISCLOSURE PERIOD:<br>THIS STATEMENT REFLECTS YO  | H PARTS OF THIS SECTUR FINANCIAL INTERESTS FOR<br>LEASE STATE BELOW WHETHER   | THE PRECEDING TAX YEAR            | , WHETH<br>HE PRE   | IER BASED ON A CALENDAR<br>CEDING TAX YEAR ENDING  |
| FILERS HAVE THE OPTION OF US<br>CALCULATIONS, OR USING COM<br>for further details). CHECK THE O | MANNER OF CALCULATING REPORTABLE INTERESTS:<br>FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER<br>CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions<br>for further details). CHECK THE ONE YOU ARE USING (must check one): |                                   |   |  |
| PART A PRIMARY SOURCES OF   | INCOME [Major sources of income to  | the reporting person - See instru | uctions]  |  |
| (If you have nothing to re<br>NAME OF SOURCE<br>OF INCOME                                       |   | URCE'S<br>DRESS                   |   | SCRIPTION OF THE SOURCE'S<br>RINCIPAL BUSINESS ACTIVITY  |
| JPay, Inc.  | 10981 Miramar Pku   | y, Miramar FE33025                | -   | Technology   |
|   |   |                                   |   | -1   |
|   |   |                                   |   |  |
| PART B – SECONDARY SOURCES<br>[Major customers, clients,<br>(If you have nothing to             | <ul> <li>OF INCOME<br/>and other sources of income to busine<br/>report, write "none" or "n/a")</li> </ul>  | esses owned by the reporting per  | son - See   | instructions]  |
| NAME OF<br>BUSINESS ENTITY  | NAME OF MAJOR SOURCES<br>OF BUSINESS' INCOME  | ADDRESS<br>OF SOURCE              |   | PRINCIPAL BUSINESS<br>ACTIVITY OF SOURCE   |
|   |   | nc                                |   |  |
|   |   |                                   |   |  |
|   |   |                                   |   | and the second states of the second states and the second states and the second states and the second states a |
| PART C REAL PROPERTY [Land,<br>(If you have nothing to re                                       | PART C REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]<br>(If you have nothing to report, write "none" or "n/a")   |                                   | FILING INSTRUCTIONS for when<br>and where to file this form are<br>located at the bottom of page 2. |  |
|   |   |                                   | this f  | RUCTIONS on who must file<br>orm and how to fill it out<br>on page 3.  |

|  |                         |   | NOV 19 pm 2:09 🖉  |
|--|-------------------------|---|---|
| PART D - INTANGIBLE PERSONAL PROPERTY [St  | ocks, bonds, certifica  | tes of deposit, etc See ir  |   |
| (If you have nothing to report, write "nor<br>TYPE OF INTANGIBLE   | ne'' or ''n/a'')<br>I   | BUSINESS ENTITY TO  | WHICH THE PROPERTY RELATES  |
| Checking & Savings Acct.   |                         | Chase Bank  | Which the thot extra Leb red  |
|  | 7                       | Fidelity Inve   |   |
| Ketirement   |                         | raency inve   | STMENTS   |
| PART E — LIABILITIES [Major debts - See instruction<br>(If you have nothing to report, write "nor                    | ns]<br>ne'' or ''n/a'') |   |   |
| NAME OF CREDITOR   |                         | ADDRE   | SS OF CREDITOR  |
| US Bank  | P.O. Box 2              | 188, Oshkosh,   | N 54903-2188  |
| PART F — INTERESTS IN SPECIFIED BUSINESSES<br>(If you have nothing to report, write "none<br>NAME OF BUSINESS ENTITY | " or "n/a")             | ions in certain types of bu<br>ESS ENTITY # 1   | isinesses - See instructions]<br>BUSINESS ENTITY # 2  |
| ADDRESS OF BUSINESS ENTITY   |                         |   |   |
| PRINCIPAL BUSINESS ACTIVITY  |                         | 10  |   |
| POSITION HELD WITH ENTITY  | /                       | $\mathcal{O}4$  |   |
| I OWN MORE THAN A 5% INTEREST IN THE BUSINESS  | 3                       |   |   |
| NATURE OF MY OWNERSHIP INTEREST  |                         |   |   |
| PART G — TRAINING<br>For elected municipal officers required to complete an<br>I CERTIFY THAT I                      |                         |   | 2, F.S.<br>QUIRED TRAINING.   |
| IF ANY OF PARTS A THROUGH G AR   | E CONTINUED C           | ON A SEPARATE SH  | EET, PLEASE CHECK HERE  |
| SIGNATURE OF FILE  | ER:                     | CPA or ATT  | ORNEY SIGNATURE ONLY  |
| Signature:   |                         | If a certified public ac<br>in good standing with<br>she must complete th<br>I,<br>Form 1 in accordance | countant licensed under Chapter 473, or attorney<br>the Florida Bar prepared this form for you, he or<br>e following statement:<br>, prepared the CE<br>e with Section 112.3145, Florida Statutes, and the<br>n. Upon my reasonable knowledge and belief, the |
| 11-19-19   | y                       | CPA/Attorney Signatu  | re:   |
| FILING INSTRUCTIONS:   | 7                       | CPA/Attorney Signatu  | re:   |

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

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

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

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

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

*Finally*, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does <u>not</u> relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2018.

CE FORM 1 - Effective: January 1, 2019. Incorporated by reference in Rule 34-8.202(1), F.A.C.

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\*\*Website Version Only

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

NOV 19 PM 2:09 We the undersigned electors of the Town of Surfside, Florida, hereby nominate DMO Zingel for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 17. 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:                      | 1-2-   | Date:       | 11/17/19           | D.O.B.                                   |                       |  |
|---------------------------------|--|-------------|--------------------|--|-----------------------|--|
| Print Name:                     | Michelle weindeng  | Address:    | Contraction of the |  |                       |  |
| Signature:                      | ha Wata Di   | Date:       | 117171/19          | D.Q.B.                                   |                       |  |
| Print Name:                     | Mr Said Mor  | Address:    |                    |  |                       |  |
| Signature:                      | <u> </u>   | Date:       | 11-18-19           | D.O.B.                                   |                       |  |
| Print Name:                     | Shorn Cook Sarah Cook  | Address:    |                    |  | and the second second |  |
| Signature:                      | forthe Handwergen  | Date:       | \$9-071019         | D.O.B.                                   |                       |  |
| Print Name:                     | Roshi Mandwerger   | Address:    |                    |  |                       |  |
| Signature: 🗸                    | Alt and and werger   | Date:       |                    | D.O.B.                                   |                       |  |
| Print Name:                     | Alexandra H.   | Address:    |                    |  |                       |  |
| Signature:                      | Sert 911   | Date:       | 11/11/19           | D.O.B.                                   |                       |  |
| Print Name:                     | Auckanding - 1 landwerger  | Address:    |                    |  |                       |  |
| Signature:                      | 1 Her  | Date:       | 1117/19            | D.O.B.                                   |                       |  |
| Print Name:                     | Alexandra Handwarge  | Address:    |                    |  |                       |  |
| Signature:                      | Left gfor  | Date:       | $\Pi_{17}/19$      | D.O.B.                                   |                       |  |
| Print Name:                     | Alexandra Handwerge  | Address:    |                    |  |                       |  |
| Signature:                      | <u>e</u>   | Date:       | 1118/19            | D.O.B.                                   |                       |  |
| Print Name:                     | Yiscoet Et Ginsburg  | Address:    |                    | iinaa ahaana ahaana                      |                       |  |
| Signature:                      |  | Date:       | 1147-119           | D.O.B.                                   |                       |  |
| Print Name:                     | Obelling Weiss   | Address:    |                    | an a |                       |  |
| Signature:                      |  | Date:       | 111779             | D.O.B.                                   |                       |  |
| Print Name:                     | Jakob Weiss  | Address:    |                    | and the second second                    | 2                     |  |
| Signature:                      | - Marts  | Date:       | 11/18/19           | D.O.B.                                   |                       |  |
| Print Name:                     | Steren B. Schoortz   | Address:    |                    |  |                       |  |
| Signature:                      | Melitche   | Date:       | 11/18/19           | D.O.B.                                   |                       |  |
| Print Name:                     | mali Schwertz)   | Address:    |                    |  |                       |  |
|                                 | STATEMENT  | OF CIRCUL   | ATOR               |  | I                     |  |
| The undersid                    | gned is the circulator of the foregoing paper co   | ontainino C | 7 signature        | s. Each signature app                    | bended                |  |
|                                 | made in my presence and is the genuine sign  |             |                    |  |                       |  |
| Signature of                    | Circulator: hhat   |             |                    |  | I                     |  |
|                                 | Iddress of Circulator: <u>9000 Harding Ave. Surfside FL 33154</u><br>Email address of Circulator: <u>dauzinger@gmail.com</u><br>ACCEPTANCE OF NOMINATION |             |                    |  |                       |  |
| I hereby acce<br>serve if elect | ept the nomination of <u>ComMission</u>  |             |                    | ayor or Commissioner)                    | and agree to          |  |
| Signature of                    | Candidate:   |             |                    | Date: //-/9-/9                           |                       |  |

\*\*Website Version Only

1074

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

NOV 19 PH 2:10

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Shomo Danzer (Mayor or Commissioner) at an election to be held on March 17, 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:  | Date: (1/15/20           | D.O.B.                   | <b>1</b>       | -  |
|---|--------------------------|--------------------------|----------------|----|
| Print Name: Dovid Duchnan   | Address:                 |                          | į.             |    |
| Signature:  | Date: 11/15/2            | D.O.B.                   | \$             |    |
| Print Name: Joshua Greisman   | Address:                 | 1.2                      |                |    |
| Signature:  | Date: 11-15-#2           | • D.O.B.                 |                |    |
| Print Name: Derorch Halbrestan  | Address:                 |                          | Ľ.             |    |
| Signature:  | Date: 11-15-19           | D.O.B.                   |                | А. |
| Print Name: Jong Law Kub/nstein   | Address:                 |                          | ٤              |    |
| Signature:  | Date: 11 5 20            | D.O.B                    |                |    |
| Print Name: David Schutz  | Address:                 |                          |                |    |
| Signature: JAJY VERUSALAMY  | Date: 11/15.19           | D.O.B                    | A A            | -  |
| Print Name:   | Address:                 |                          | 2              |    |
| Signature: Choth Comessing  | Date: 11/15 19           | D.O.B.                   | 4              |    |
| Print Name: CHAYA CAMISSAR  | Address:                 |                          | ÷2             |    |
| Signature:  | Date: 11/15/19           | D.O.B                    | 5.             |    |
| Print Name: JONAM BARDOS  | Address:                 |                          | <u> </u>       |    |
| Signature:  | Date: 11/15/11           | <u></u>                  | The second     |    |
| Print Name: FRYIAS Roller   | Address:                 |                          |                | 1  |
| Signature:  | Date: 11/15/20           | 29D.O.B.                 |                |    |
| Print Name: stargard Phay on  | Address:                 |                          | £.             |    |
| Signature:  | Date: 11 15 19           | D.O.B.                   |                |    |
| Print Name: SALOMUN JVROVIES  | Address:                 | 2                        | 1              |    |
| Signature:  | Date: 11 15/19           | D.O.B                    | <u> </u>       |    |
| Print Name: 23EM KIEN   | Address:                 | je                       | aniinn lannan. |    |
| Signature: Dy y J   | Date: <u>     \$   4</u> | D.O.B                    |                |    |
| Print Name: Dov SCHXHET   | Address:                 | J                        |                |    |
| STATEMENT   | OF CIRCULATOR            |                          | 1              |    |
| The undersigned is the circulator of the foregoing paper cor  | 10                       | res. Each signature appe | ended          |    |
| thereto was made in my presence and is the genuine signal   |                          |                          |                |    |
|   |                          |                          |                |    |
| Signature of Circulator:  | e, Surfside FL.          | 23154                    |                |    |
| ddress of Circulator: <u>9000 Harding Av</u><br>Email address of Circulator: <u>Canzinger@amail</u> |                          | )-(-)                    |                |    |
|   |                          |                          |                |    |

ACCEPTANCE OF NOMINATION
I hereby accept the nomination of <u>COMMISSIONEN</u> (Mayor or Commissioner) and agree to serve if elected.

Signature of Candidate:

Date: //-/9-/9

\*\*Website Version Only

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

NOV 19 PH 2:10.

We the undersigned electors of the Town of Surfside, Florida, hereby nominate <u>Shlown Danzi Nger</u> for the office of <u>Commissioner</u> (Mayor or Commissioner) at an election to be held on March 17, 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:   | Date: Mat. /? D.O.B. 0019 -   |
|--|-------------------------------|
| Print Name: GIARON AZARI   | Address:                      |
| Signature:   | Date: ////2//9D.O.B.          |
| Print Name: Rochellech Danzinger   | Address:                      |
| Signature:   | Date: D.O.B                   |
| Print Name: SIMPUTZ, WOLFF   | Address:                      |
| Signature:   | Date:D.O.B                    |
| Print Name: showed Friedman  | Address:                      |
| Signature: Nothin Hillon   | Date: W/8/19 D.O.B.           |
| Print Name: Naihyn Miller  | Address:                      |
| Signature:   | Date: 14-14 - 19 D.O.B.       |
| Print Name: MOLLIE ROD (NOTE (N  | Address:                      |
| Signature:   | Date:D.O.B                    |
| Print Name: Shilomo Danzingen  | Address:                      |
| Signature: 9   | Date://4/19D.O.B              |
| Print Name: SCHER Z DUCHMAN  | Address:                      |
| Signature: Dlaum   | Date:D.O.B                    |
| Print Name: DeSoun Duchman   | Address:                      |
| Signature:   | Date: <u>  -[5-[9</u> _D.O.B. |
| Print Name: SHARW HAKAW  | Address:                      |
| Signature: 2070 200  | Date: 11/15/19 D.O.B.         |
| Print Name: Makie Tevardoulz   | Address:                      |
| Signature:   | Date: 1, 1, 3, 0, D.O.B.      |
| Print Name: Carene Ohayon  | Address:                      |
| Signature: Accession of the second se | Date: 11-15-19 D.O.B.         |
| Print Name: M; Kbe (/ Cro KH /1PB  | Address:                      |
| STATEMENT  |                               |

## STATEMENT OF CIRCULATOR

| The undersigned is the circulator of |  | signatures. Each signature appended  |
|--------------------------------------|--|--------------------------------------|
| thereto was made in my presence a    | and is the genuine signature of the person | whose name it purports to be.        |
| Signature of Circulator:             | hhifip                                     | 2 2:1                                |
| Address of Circulator:               | 9000 Harding Ave.                          | Surtside FL 33154                    |
| Email address of Circulator:         | anzinger amai com                          |                                      |
|                                      | ACCEPTANCE OF NOMINATIC                    | DN                                   |
| I hereby accept the nomination of _  | Commissioner                               | (Mayor or Commissioner) and agree to |
| serve if elected.                    | nin  |                                      |
| Signature of Candidate:              | Allingi                                    | Date://-/9-/9                        |

| ** For unredacted version, please contact the Town Clerks Office** | **Website Version Only |
|--|------------------------|
| 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

NOV 19 PM 2:10

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate <u>Showo</u> <u>Owner</u> for the office of <u>Covnwissioner</u> (Mayor or Commissioner) at an election to be held on March 17, 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:              |                          | Date:    | 11/16/19   | D.O.B. | 1                    |                 |               |
|-------------------------|--------------------------|----------|------------|--------|----------------------|-----------------|---------------|
| Print Name:             | IRis Joy Herssan         | Address: |            |        |                      |                 |               |
| Signature:              | D Huliriti               | Date:    | 1-17-19    | D.O.B. |                      |                 | T             |
| Print Name:             | DOBAIR. RUBINSTEIN       | Address: |            |        |                      |                 | <b></b>       |
| Signature:              |                          | Date: _  | 11/16/19   | D.O.B. |                      |                 |               |
| Print Name:             | Vagcoo Sai doF           | Address: |            |        |                      | 7               | <b></b> .     |
| Signature:              |                          | Date: _  | 11/16/9    | D.O.B. |                      |                 |               |
| Print Name:             | Dalif Teshuba            | Address: | 1          |        |                      |                 | <del></del> . |
| Signature:              | LIZINAC L                | Date: _  | 11/16/19   | D.O.B. |                      |                 |               |
| Print Name:             | SHMUEL TEVARDOVITZ       | Address: |            |        |                      |                 | <del></del>   |
| Signature:              | Cinna Colonation         | Date: _  | 11/19      | D.O.B. |                      |                 |               |
| Print Name:             | Anna Rottenstein         | Address: |            |        |                      | 1               | <del></del> . |
| <sup>I</sup> Signature: | Le Pele                  | Date:    | 11-17-19   | D.O.B. | L'aller and a second |                 |               |
| Print Name:             | SAMYEL ROTTENSTEIN       | Address: |            |        | 9                    |                 | <del></del> . |
| Signature:              | Simon Janzuco            | Date: /  | 1/17/19    | D.O.B  |                      |                 |               |
| Print Name:             | SIMON TRUZMAN            | Address: |            |        |                      | <u>ي</u><br>الم |               |
| Signature:              | the fun                  | Date: _  | 11/12/2019 | D.O.B  |                      |                 | -             |
| Print Name:             | fterer Eisenberg         | Address: |            |        |                      |                 |               |
| Signature:              | Al                       | Date: _  | 11-17-19   | D.O.B. |                      |                 |               |
| Print Name:             | 1 SCHNGIL ZMUAN LIPSKAR  | Address: |            |        |                      | 7               | m.            |
| Signature:              | prn                      | Date: _  | 11/17/19   | D.O.B. |                      |                 |               |
| Print Name:             | RIVKAH LIPSKAR           | Address: |            |        |                      |                 | <b>mm</b> .   |
| Signature:              | Awn                      | Date:    | 11/17/19   | D.O.B. |                      |                 |               |
| Print Name:             | AZRIEL WASSERMAN         | Address: |            |        | 7                    |                 | <b>m</b>      |
| Signature:              | MINT                     | Date:    | 1/17/19    | D.O.B. |                      |                 |               |
| Print Name:             | <u>Chana Wasser, Man</u> | Address: |            |        |                      |                 | <del></del> . |

#### STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing  $\underline{/3}$  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:            | July 9000 Harding Ave    | Surfside FL 33/54                    |
|-------------------------------------|--------------------------|--------------------------------------|
| Émail address of Circulator:        | avisinger (@ gmail.com   |                                      |
|                                     | ACCEPTANCE OF NOMINATION |                                      |
| I hereby accept the nomination of _ | Commissioner             | (Mayor or Commissioner) and agree to |
| serve if elected.                   | nint                     |                                      |
| Signature of Candidate:             | Militin                  | Date: 11-19-19                       |

\*\*Website Version Only

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

NOV 19 PM 2:10

We the undersigned electors of the Town of Surfside, Florida, hereby nominate <u>Shlowelbunzing</u> for the office of <u>Commussioner</u> (Mayor or Commissioner) at an election to be held on March hnzmaer 17, 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:  | 8. Mm                   | Date: <u>// -/5 - / 9</u> D.O.B. |
|-------------|-------------------------|----------------------------------|
| Print Name: | Shlony Diamont          | Address:                         |
| Signature:  | Put -                   | Date: 11/15/19 D.O.B.            |
| Print Name: | 1) JOSEPH GOWBREWNER    | Address:                         |
| Signature:  | Miller                  | Date: <u>11-15-19</u> D.O.B.     |
| Print Name: | Shrieuk (Zalmy) Shaping | Address:                         |
| Signature:  | MA                      | Date: 11 15/19 D.O.B.            |
| Print Name: | SHEA Y SCHNEIDER        | Address:                         |
| Signature:  | <u>l</u>                | Date:D.O.B                       |
| Print Name: | ELISA SEPTIMUS          | Address:                         |
| Signature:  | N                       | Date: 11-13 19 D.O.B.            |
| Print Name: | AARON LISKAN            | Address:                         |
| Şignature:  | 1                       | Date: 11/15/19 D.O.B.            |
| Print Name: | Devorableah Lipskan     | Address:                         |
| Signature:  | Le m                    | Date: <u>11/15/19</u> D.O.B.     |
| Print Name: | Elyakim Boymelsreen     | Address:                         |
| Signature:  | M.B.                    | Date: 11-15-19 D.O.B.            |
| Print Name: | Meira Belgamin          | Address:                         |
| Signature:  | Cl. Heint               | Date: 11/15/19 D.O.B             |
| Print Name: | AARON GEWIRTZ           | Address:                         |
| Signature:  |                         | Date: <u>11-15-19</u> D.O.B      |
| Print Name: | Kochel ( Ostrov         | Address:                         |
| Signature:  | Ma ma                   | Date: <u>11/16/19</u> D.O.B.     |
| Print Name: | Marssa Jacobson         | Address:                         |
| Signature:  | -                       | Date: 13/16/ PP D.O.B.           |
| Print Name: | Ben Orcobson            | Address:                         |
|             | STATEMEN                |                                  |

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

| Signature of Circulator:                               |  |
|--|--|
| Address of Circulator: dooo Harding Ave.               | Surfside FL 33154                      |
| Email address of Circulator: Clanzinger (2) g mail Com |  |
| ACCEPTANCE OF NOMINATION                               |  |
| I hereby accept the nomination of                      | _ (Mayor or Commissioner) and agree to |
| serve if elected.                                      |  |
| Signature of Candidate:                                | Date://-/9_/9_                         |

\*\*Website Version Only

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

NOV 19 PH 2:10

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Showo Danzinger for the office of Communication Science (Mayor or Commissioner) at an election to be held on March 17, 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:   | Dat  | Date:    | 11-15-19        | D.O.B.   |                  |   |
|--------------|--|----------|-----------------|----------|------------------|---|
| Print Name:  | BEZALEL CAMISSAR   | Address: |                 |          |                  |   |
| Signature:   | SHUXA FARKAJH  | Date:    | 11/16190        | D.O.B.   | 7                |   |
| Print Name:  | CHARA EARKAJE  | Address: |                 |          |                  |   |
| Signature:   | Dentron.   | Date:    | 1115/1989       | D.O.B.   | 1                |   |
| Print Name:  | Debora Earkish   | Address: |                 |          |                  |   |
| Signature:   |  | Date:    |                 | D.O.B.   |                  |   |
| Print Name:  |  | Address: | PERSONAL STREET | states a | A CONTRACTOR     | <b>v</b>  |
| Signature:   | Jacay,   | Date:    | 11/15/19        | D.O.B.   |                  |   |
| Print Name:  | Asam hemplunt  | Address: |                 |          |                  | 7   |
| Signature:   | Lay mintres  |          | 11/15/19        | D.O.B.   |                  |   |
| Print Name:  | SERGIO GURVITSCH   | Address: |                 |          |                  |   |
| Signature:   | - P  | Date:    | 11/15/19        | D.O.B.   |                  |   |
| Print Name:  | BALLY COVEN  | Address: |                 | Januaria |                  |   |
| Signature:   | / J,   | Date:    | 11/15/19        | D.O.B.   |                  | <u> </u>  |
| Print Name:  | RUTH MELOUL  | Address: |                 |          |                  |   |
| Signature:   | Chilos fin -   | Date:    | 11/15/19        | D.O.B.   |                  |   |
| Print Name:  | Shmvel Rybashkin   | Address: |                 |          |                  |   |
| Signature:   | Pha  | Date:    | 11/15/19        | D.O.B.   |                  |   |
| Print Name:  | Rochel Rubash Kin  | Address: |                 |          |                  |   |
| Signatyre:   | United and the second s | Date:    | 11/15/19        | D.O.B.   |                  |   |
| Print Name:  | methren Je Broz  | Address: |                 |          |                  |   |
| Signature:   | Choma Ehrlich  | Date:    | 1/15/19         | D.O.B.   |                  | <u></u>   |
| Print Name:  | Chana Ehrlich  | Address: | C               |          | ······           |   |
| Signature:   | The Denverthe  | Date:    | 11/8/19         | D.O.B.   | 5                |   |
| Print Name:  | YOSET FWIDUITZ   | Address: |                 |          | <b>.</b>         | The second se |
|              | STATEMENT  | OF CIRCU | LATOR           |          |                  |   |
| The undersig | ned is the circulator of the foregoing paper cor   | ntaining | 12 signature    | s. Each  | signature append | ed  |
|              | nade in my presence and is the genuine signal  |          | person whose na | me it pu | rports to be.    |   |

| Signature of Circulator:                         | 33154                                  |
|--|--|
| Email address of Circulator: danzinger @gmay.com |  |
| ACCEPTANCE OF NOMINATION                         |  |
| I hereby accept the nomination of                | _ (Mayor or Commissioner) and agree to |
| serve if elected.                                | •                                      |
| Signature of Candidate:                          | Date:11-19-19                          |

\*\*Website Version Only

NOV-19 PM 2:10

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 <u>Shomo Danzinger</u> for the office of <u>Commissioner</u> (Mayor or Commissioner) at an election to be held on March 17, 2020.

This petition must be filed with the Town Clerk between November 1, 2019 and November 22, 2019 (by 12:00pm).

| Signature:   | Ment 10  | Date:        | 11/17/19    | D.O.B.  |                        |       |   |
|--------------|--|--------------|-------------|---------|------------------------|-------|---|
| Print Name:  | Menachen KAte  | Address:     | )           |         |                        |       |   |
| Signature:   | mis  | Date:        | 11-17-15    | D.O.B.  |                        |       |   |
| Print Name:  | Entra Rochel Kerr  | Address:     |             |         |                        |       |   |
| Signature:   | Chan .   | Date:        | 11/17/19    | D.O.B.  |                        |       | 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - |
| Print Name:  | Gordon Brawn   | Addres       |             |         |                        |       |   |
| Signature:   | - HB   | Date:        | 11/17/19    | D.O.B.  |                        |       |   |
| Print Name:  | Marian Braun   | Address:     |             |         |                        |       |   |
| Signature:   | Be   | Date:        | 11/17/19    | D.O.B.  | $\int dx = \int dx$    |       |   |
| Print Name:  | Yohuda Bast  | Address:     | A ALE AND S |         |                        | 1     |   |
| Signature:   | Change Woonterles  | Date:        | 11/17/19    | D.O.B.  |                        |       |   |
| Print Name:  | il and the second secon | Address:     |             |         | III and I all a " they |       | 7   |
| Signature:   |  | Date:        | 11/1/19     | D.O.B.  |                        |       | 1   |
| Print Name:  | Renel State Lins X   | Address:     |             |         |                        |       |   |
| Signature:   | (XSWapono)   | Date:        | 11-19-19    | D.O.B.  |                        |       |   |
| Print Name:  | Daniel Shapiro   | Address:     |             |         |                        |       |   |
| Signature:   |  | Date:        |             | D.O.B.  |                        |       | ſ   |
| Print Name:  |  | Address:     |             |         |                        |       | <b></b>   |
| Signature:   | *  | Date:        |             | D.O.B.  |                        |       |   |
| Print Name:  |  | Address:     |             |         |                        |       |   |
| Signature:   |  | Date:        |             | D.O.B.  |                        |       |   |
| Print Name:  |  | Address:     |             |         |                        |       | <b></b>   |
| Signature:   |  | Date:        |             | D.O.B.  |                        |       |   |
| Print Name:  |  | Address:     |             |         |                        |       | <b>.</b>  |
| Signature:   |  | Date:        |             | D.O.B.  |                        |       |   |
| Print Name:  |  | Address:     |             |         |                        |       | <del>.</del>  |
| 8            | STATEME  | NT OF CIRCUL | ATOR        |         |                        |       | l   |
| The undersig | ned is the circulator of the foregoing paper   |              | -,          | s. Each | signature app          | ended |   |

thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

| Signature of Circulator:     | lilian                              |  |
|------------------------------|-------------------------------------|--|
| Address of Circulator:       | 9000 Harding Ave, Surfside FL 33154 |  |
| Email address of Circulator: |                                     |  |
|                              | ÷ 0                                 |  |

ACCEPTANCE OF NOMINATION

| I hereby accept the nomination of | Commissioner | (Mayor or Commissioner) and agree to |
|-----------------------------------|--------------|--------------------------------------|
| serve if elected.                 | ΛΙΛΙ         |                                      |
| Signature of Candidate:           | Majo         | Date:/1-/9-/9                        |

| CAMPAIGN TREASURE   | R'S REPORT SUMMARY  |
|---|---|
| (1) Shlomo Danzinger  | OFFICE USE ONLY   |
| Name         (2)       9000 Harding Ave         Address (number and street)         Surfside, FL 33154  | DEC4 '19 4:51Pi   |
| City, State, Zip Code   | (3) ID Number:  |
| <ul> <li>(4) Check appropriate box(es):</li> <li>              Candidate Office Sought: Commission      </li> <li>             Political Committee (PC)         </li> <li>             Electioneering Communications Org. (ECO)         </li> <li>             Party Executive Committee (PTY)         </li> <li>             Independent Expenditure (IE) (also covers an individual making electioneering communications)     </li> </ul> |   |
| (5) Report  | t Identifiers   |
| Cover Period: From <u>11</u> / <u>1</u> / <u>19</u> To  | 11 / 30 / 19 Report Type: 2019M11                                   |
| Original Amendment Sp   | ecial Election Report   |
| (6) Contributions This Report Cash & Checks \$,, 100.00   | (7) Expenditures This Report<br>Monetary<br>Expenditures \$,, 29.30 |
| Loans       \$, 1   | Transfers to         Office Account       \$                        |
| In-Kind \$,,  | (8) Other Distributions<br>\$,,                                     |
| (9) TOTAL Monetary Contributions To Date<br>\$, 1, 30000_   | (10) TOTAL Monetary Expenditures To Date<br>\$,,2930                |
|   | tification<br>son 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) Shlomo Danzinger  | (Type name) Shlomo Danzinger  |
| Signature   | Signature   |

| DS-DE 12 (Rev. | 11 | 1/13) | 1 |
|----------------|----|-------|---|
|----------------|----|-------|---|

SEE REVERSE FOR INSTRUCTIONS

DEC4 '19 4:51PM

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SHLOMO DANZINGER

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

(3) Cover Period \_\_\_\_\_ / \_\_\_ / \_\_\_ / \_\_\_ through \_\_\_\_ / \_\_\_ / \_\_\_ (4) Page \_\_\_\_ of \_\_\_\_

| (5)  | (7)   | (8)   | (9)                 | (10)      | (11)    |
|--|---|---|---------------------|-----------|---------|
| Date<br>(6)<br>Sequence<br>Number              | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount  |
| 11 / 19/19<br>1                                | Town of Surfside<br>9293 HARDING AVENUE<br>SURFSIDE, FL 33154                           | Filing Fee  | CAN                 |           | \$25.00 |
| <sup>11</sup> <sup>29</sup> <sup>19</sup><br>2 | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$4.30  |
| _ / _  |   |   |                     |           |         |
| _/_/   |   |   |                     |           |         |
| / /  |   |   |                     |           |         |
| .  |   |   |                     |           |         |
| / /  |   |   |                     |           |         |
| _/_/   |   |   |                     |           |         |

# CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS 3453PM

| (1) Name                               | SHLOM   | O DANZINGER  | (2) I.D. Number |                                 |                             |                                |                       |                  |
|--|---------|--|-----------------|---------------------------------|-----------------------------|--------------------------------|-----------------------|------------------|
| (3) Cover                              | Period  | 11 / <sup>01</sup> / <sup>19</sup>   | throu           | gh / _                          | 30 19                       | _ (4) Page                     | DEC4 '19 3:<br>1<br>( | 53PM             |
| (5)<br>Date<br>(6)<br>Sequenc<br>Numbe |         | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Со              | (8)<br>ontributor<br>Occupation | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment     | . (12)<br>Amount |
| 11 13<br>/<br>1                        | 19<br>/ | Danzinger, Shlomo<br>9000 Harding<br>AveSurfside FL 33154<br>United States                     | S               | U.X.                            | LOA                         |                                |                       | \$1,200.00       |
| 11 29 <sup>.</sup><br>/ 2              | 19<br>/ | Wasserman, Azriel<br>9032 Emerson Avenue<br>Surfside FL 33154<br>United States                 | I               | E-Commerce                      | RCT                         |                                |                       | \$100.00         |
| 1                                      | 1       |  | 8               |                                 |                             |                                |                       |                  |
| 1                                      | 1       | 3  |                 |                                 |                             |                                |                       |                  |
| 1                                      | 1       |  |                 |                                 |                             |                                |                       |                  |
| /                                      | 1       |  | -1              |                                 |                             |                                |                       |                  |
| 1                                      | 1       |  |                 |                                 |                             |                                |                       |                  |

| PAID CAMPAIGN WOR   | LECTIONS DEPARTMENT<br>RKERS PARTICIPATING<br>ACTIVITIES SUMMARY                  |
|---|---|
| Name  | OFFICE USE ONLY   |
| Shlomo Danzinger  |   |
| I.D. Number   |   |
| Address (number and street)<br>9000 Harding Ave                                   | DEC4 '19 3:54PM   |
| City, State, Zip Code<br>Surfside, FL 33154                                       |   |
| CHECK IF ADDRESS HAS CHANGED  |   |
| Candidate for:  |   |
| ☐ Mayor<br>☑ Commissioner, District <u>_</u> Town of Surfside                     | _   |
| Property Appraiser  |   |
| Clerk of the Circuit Courts   |   |
| Community Council, Area, Su   | p-Area  |
| REPORT IDE  | NTIFIERS  |
| Report Name 2019M11 Cover Period  | through <u>11/30/2019</u> <u>11/30/2019</u>                                       |
| 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, correct, and complete. | I certify that I have examined this report and it is true, correct, and complete. |
| Shlomo Danzinger  | Shlomo Danzinger  |
| (Type name) 🗹 Treasurer 🔲 Deputy Treasurer  | (Type name) 🛛 🖾 Candidate   |
| x Inthe Asia  | × Malin   |
| 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 | Shlomo Danzinger |
|----------|------------------|
| (1) Hume | -                |

DEC4 '19 3:54PM \_\_\_\_ (2) I.D. Number \_\_\_\_\_

| (3) Report N | ame 2019M11 |
|--------------|-------------|
|--------------|-------------|

\_\_\_\_\_through <u>11/30/</u>2019 (4) Cover Period 11/01/2019

(6) Page \_\_\_\_\_ of \_\_\_\_\_

(5) Report Type 🛛 Original 🛛 Amendment

| (7)<br>Row<br>Number | (8)<br>Full Name<br>(Last, Suffix, First, Middle) | (9)<br>Employed By | (10)<br>Name of Organization Employed By<br>(if not directly hired by campaign) | (11)<br>Amendment<br>Type |
|----------------------|---|--------------------|---|---------------------------|
| None                 | None  | None               | None  | None                      |
|                      |   |                    |   | /                         |
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| CAMPAIGN TREASURER'S REPORT SUMMARY   |   |  |  |
|---|---|--|--|
| (1) SHLOMO DANZINGER  | OFFICE USE ONLY   |  |  |
|   |   |  |  |
| (2) 9000 HARDING AVE<br>Address (number and street)   | <b>f</b>  |  |  |
| SURFSIDE, FL 33154  | JAN8 '20 9:42AM   |  |  |
| City, State, Zip Code   |   |  |  |
| Check here if address has changed   | (3) ID Number:  |  |  |
| (4) Check appropriate box(es):  | her   |  |  |
| Candidate Office Sought: COMMISSION   |   |  |  |
| <ul> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> </ul>               | Check here if PC or ECO has disbanded Check here if PTY has disbanded |  |  |
| Independent Expenditure (IE) (also covers an  | Check here if no other IE or EC reports will be filed                 |  |  |
| individual making electioneering communications)  |   |  |  |
| . (5) Report  | Identifiers   |  |  |
| Cover Period: From <u>12</u> / <u>01</u> /2019 To   | 12 /31 /2019 Report Type: 2019M12                                     |  |  |
| Image: Original   Image: Amendment   Image: Specific sector   | ecial Election Report   |  |  |
| (6) Contributions This Report   | (7) Expenditures This Report  |  |  |
| Cash & Checks \$, _4_, 568. 46  | Monetary<br>Expenditures \$, <u>3</u> , <u>231</u> . <u>29</u>        |  |  |
| Loans \$,, <u>0</u> .00   | Transfers to<br>Office Account \$ , , 0.00                            |  |  |
| Total Monetary \$,4, _5686  | Total Monetary \$ , 3,231.29  |  |  |
| In-Kind \$,,  |   |  |  |
|   | (8) Other Distributions   |  |  |
|   | \$,, <u>0 0000</u>  |  |  |
| (9) TOTAL Monetary Contributions To Date<br>\$ , 5, 868 46  | (10) TOTAL Monetary Expenditures To Date                              |  |  |
|   | \$, <u>3</u> , <u>260</u> . <u>59</u>                                 |  |  |
| (11) Certification<br>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) Shlomo Danzinger  | (Type name) Shlomo Danzinger  |  |  |
| ☐ Individual (only for IE   | Candidate Chairperson (only for PC and PTY)                           |  |  |
| x' Mali   | v MAL.  |  |  |
| Signature   | X Signature   |  |  |

DS-DE 12 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS

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

| (1) | Name |
|-----|------|

SHLOMO DANZINGER

(2) I.D. Number 20 9:42AM

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(3) Cover Period \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page \_\_\_\_\_ of \_\_\_\_

| (5)<br>Date               | (7)<br>Full Name   |            | (8)                      | (9)  | (10)                   | (11)      | (12)       |
|---------------------------|--|------------|--------------------------|--|------------------------|-----------|------------|
| (6)<br>Sequence<br>Number | (Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code           | Co<br>Type | ontributor<br>Occupation | Contribution<br>Type                       | In-kind<br>Description | Amendment | Amount     |
| 12 04 2019<br>/ /<br>1    | Daniel Gielchinsky<br>9511 Collins Avenue<br>Apt.# 711<br>Surfside FL 33154          | I          | Attorney                 | RCT  |                        |           | \$50.00    |
| 12 04 2019<br>/ 2019      | Velvel Freedman<br>9500 W Bay Harbor Dr.<br>Apt 7A<br>Bay Harbor Islands FL<br>33154 | I          | Attorney                 | RCT  |                        |           | \$500.00   |
| 12 06 2019                | Michael Blisko<br>9390 Bay Drive<br>Surfside FL 33154                                | I          | Businessman              | RCT  |                        |           | \$1,000.00 |
| 12 06 2019<br>/ /<br>4    | Ronit Blisko<br>9390-Bay Drive<br>Surfside FL 33154                                  | I          | Homemaker                | RCT  |                        |           | \$1,000.00 |
| 12 19 2019<br>/ /<br>5    | Ben Jacobson<br>Campaign Account<br>9455 Collins Ave. #309<br>Surfside FL 33154      | I          | Consulting               | CHE<br>Reimbursen<br>Printing<br>Expenses  | ent                    |           | \$1,009.23 |
| 12 19 2019<br>/ /<br>6    | Iris J Herssein<br>Campaign Account<br>701 94th St<br>Surfside FL 33154              | I          | Attorney                 | che<br>Reimburseme<br>Printing<br>Expenses | urt                    |           | \$1,009.23 |
| . 1 1                     | -  |            |                          |  |                        |           | •          |

DS-DE 13 (Rev. 11/13)

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

(1) Name SHLOMO DANZINGER

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

## (3) Cover Period $\frac{12}{2019}$ / $\frac{01}{2019}$ / $\frac{2019}{12}$ / $\frac{31}{2019}$ (4) Page $\frac{1}{2019}$ of

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| (5)  | (7)   | (8)   | (9)                 | (10)      | . (11)   |
|--|---|---|---------------------|-----------|----------|
| Date<br>(6)<br>Sequence<br>Number                    | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount   |
| 12 /02 /2019<br>1                                    | 1&1 IONOS Inc.<br>701 Lee Road<br>Suite 300<br>Chesterbrook, PA 19087                   | Web Domain<br>Web Hosting   | CAN                 |           | \$4.00   |
| 12 04 2019<br>2                                      | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$2.30   |
| 12 04 2019   | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$20.30  |
| 12 05 2019<br>4                                      | USPS Surfside<br>250 95th Street<br>Surfside, FL 33154                                  | Stamps  | CAN                 |           | \$11.00  |
| 12 05 2019<br>5                                      | CVS Pharmacy<br>9578 Harding Ave<br>Surfside, FL 33154                                  | Envelopes   | CAN                 |           | \$4.49   |
| 12 06 2019<br>6                                      | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$40.30  |
| 12 06 2019<br>7                                      | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$40.30  |
| <sup>12</sup> / <sup>17</sup> / <sup>2019</sup><br>8 | Overnight Prints<br>7582 Las Vegas Blvd. S. Suite #487,<br>Las Vegas, NV, 89123         | Printing:<br>Business Cards<br>Brochures<br>Postcards               | CAN                 |           | \$789.86 |

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name SHLOMO DANZINGER

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

(4) Page \_\_\_\_

(3) Cover Period <u>12</u> / <u>01</u> / <u>2019</u> through <u>12</u> / <u>31</u> / <u>2019</u>

| (5)                               | (7)   | (8)   | (9)                 | (10)      | (11)       |
|-----------------------------------|---|---|---------------------|-----------|------------|
| Date<br>(6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount     |
| 12 /17 /2019<br>9                 | Signs.com<br>1550 South Gladiola Street<br>Salt Lake City, UT 84104                     | Printing:<br>Lawn Signs   | CAN                 |           | \$1,544.91 |
| 12 18 2019<br>. 10                | Underground Printing<br>260 Metty Dr., Suite G<br>Ann Arbor, MI 48103                   | Printing:<br>T-Shirts   | CAN                 |           | .\$564.10  |
| 12 19 2019<br>11                  | Ben Jacobson Campaign Account<br>9455 Collins Ave. #309<br>Surfside FL 33154            | Reimbursement:<br>Condo event<br>Food /drinks                       | CAN                 |           | \$76.91    |
| 12 20 2019                        | Quality Logo Products, Inc.<br>724 North Highland Avenue<br>Aurora, Illinois 60506      | Printing:<br>Pens   | CAN                 |           | \$128.82   |
| 12 /27 /2019<br>13                | 1&1 IONOS Inc.<br>701 Lee Road<br>Suite 300<br>Chesterbrook, PA 19087                   | Web Domain<br>Web Hosting   | CÀN                 |           | \$4.00     |
|                                   |   |   |                     |           |            |
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 $\overset{\cdot}{\operatorname{\mathsf{Reverse}}}$  for instructions and code values

| PAID CAMPAIGN WO  | ELECTIONS DEPARTMENT<br>RKERS PARTICIPATING<br>T ACTIVITIES SUMMARY   |
|---|---|
| Name<br>SHLOMO DANZINGER  | OFFICE USE ONLY   |
| I.D. Number   |   |
| Address (number and street)<br>9000 HARDING AVE   | JAN8 '20 9:42AM   |
| City, State, Zip Code<br>SURFSIDE, FL 33154   | ·   |
| CHECK IF ADDRESS HAS CHANGED  |   |
| Candidate for:<br>Mayor<br>Commissioner, District <u>Town of Surfside</u><br>Property Appraiser<br>Clerk of the Circuit Courts<br>Community Council, Area, Su |   |
| REPORT IDE<br>Report Name 2019M12 Cover Perio   |   |
| Report Type 🗹 Original 🛛 Amendment  |   |
|   | ICATION   |
| I certify that I have examined this report and it is true,<br>correct, and complete.  | son to falsify a public record (ss. 839.13, F.S.)<br>I certify that I have examined this report and it is true,<br>correct, and complete. |
| Shlomo Danzinger  | Shlomo Danzinger  |
| (Type name)   | (Type name) Candidate       X       Signature   |

### PAID CAMPAIGN WORKERS PARTICIPATING IN ABSENTEE BALLOT ACTIVITIES

| This report must be filed by ap | oplicable candidates running for To | own of Surfside Mayor or Town Commissioner. |
|---------------------------------|-------------------------------------|---|
|---------------------------------|-------------------------------------|---|

(1) Name SHLOMO DANZINGER

JANS '20 9:42AM (2) I.D. Number \_\_\_\_\_

| (3) Report Name | 2019M12 |
|-----------------|---------|
| (3) Report Name |         |

\_\_\_\_\_ (4) Cover Period <u>12/01/2019</u> through <u>12/31/2019</u>

(5) Report Type 🔽 Original 🔲 Amendment (6) Page 1\_\_\_\_\_\_ of 1\_\_\_\_\_

| (7) ·<br>Row<br>Number | (8)<br>Full Name<br>(Last, Suffix, First, Middle) | (9)<br>Employed By | (10)<br>Name of Organization Employed By<br>(if not directly hired by campaign) | (11)<br>Amendment<br>. Type |
|------------------------|---|--------------------|---|-----------------------------|
| None                   | None  | None               | Ncne  | None                        |
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| CAMPAIGN TREASURER'S REPORT SUMMARY   |  |  |  |  |  |
|---|--|--|--|--|--|
| (1) SHLOMO DANZINGER  | OFFICE USE ONLY                        |  |  |  |  |
| (2) Name<br>Address (number and street)<br>SURFSIDE, FL 33154<br>City, State, Zip Code  | TOWN OF SURFSIDE                       |  |  |  |  |
|   | (3) ID Number:                         |  |  |  |  |
|   |  |  |  |  |  |
| (5) Report  | Identifiers                            |  |  |  |  |
| Cover Period: From 01 / 01 /2020 To   | 01 / 31 /2020 Report Type: 2020M1      |  |  |  |  |
| ✓ Original   □ Amendment   □ Spender  | ecial Election Report                  |  |  |  |  |
| (6) Contributions This Report   | (7) Expenditures This Report           |  |  |  |  |
| Cash & Checks \$,, 600.00   | Monetary<br>Expenditures \$,, 28 . 60  |  |  |  |  |
| Loans \$,, 0.00   | Transfers to<br>Office Account \$,,000 |  |  |  |  |
| Total Monetary       \$   | Total Monetary \$,, <u>28</u> .60      |  |  |  |  |
| · .   | (8) Other Distributions<br>\$,,,       |  |  |  |  |
| (9)         TOTAL Monetary Contributions To Date         (10)         TOTAL Monetary Expenditures To Date           \$  |  |  |  |  |  |
| (11) Certification<br>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) Shlomo Danzinger  | (Type name) Shlomo Danzinger           |  |  |  |  |
| Individual (only for IE or electioneering comm.)       Image: Common term of the second |  |  |  |  |  |
| X Ahladam<br>Signature  | X Ahladan                              |  |  |  |  |
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SEE REVERSE FOR INSTRUCTIONS

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

|     |      | SHLOMO | DANZINGER |
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| (1) | Name |        |           |

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| (1) Name                          |  |            |                          | (2)                  | I.D. Number            |           | an       |
|-----------------------------------|--|------------|--------------------------|----------------------|------------------------|-----------|----------|
| (3) Cover Period                  | / / 2020   | throu      | gh / _                   | <sup>31</sup> /      | (4) Page               | 0         | of       |
| (5)                               | (7)  |            | (8)                      | (9)                  | (10)                   | (11)      | (12)     |
| Date<br>(6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code  | Co<br>Type | ontributor<br>Occupation | Contribution<br>Type | In-kind<br>Description | Amendment | Amount   |
| 01 14 2020<br>/ /<br>1            | Gabriel Gliksberg<br>805 N Milwaukee Ave<br>Ste 301<br>Chicago IL 60642<br>United States | .I         | Investments              | RCT                  |                        |           | \$500.00 |
| 01 <u>26</u> 2020<br>2            | Andy & Eti Bales<br>9165 FroudeAve<br>Surfside FL 33154<br>United States                 | I          | Architect                | RCT                  |                        |           | \$100.00 |
|                                   |  |            |                          |                      |                        |           |          |
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DS-DE 13 (Rev. 11/13)

TOWN OF SURFSIDE

FEB10 '20 12:45PM

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

## (1) Name SHLOMO DANZINGER

(2) I.D. Number

(3) Cover Period  $^{01}$  /  $^{01}$  /  $^{2020}$  through  $^{01}$  /  $^{31}$  /  $^{2020}$  (4) Page  $^{1}$  of  $^{1}$ 

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| (5)                               | (7)   | (8)   | (9)                 | (10)      | (11)         |
|-----------------------------------|---|---|---------------------|-----------|--------------|
| Date<br>(6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount       |
| 01 / 14/2020                      | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$20.30      |
| 01 26 2020<br>2                   | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$4.30       |
| 01 27 2020                        | 1&1 IONOS Inc.<br>701 Lee Road<br>Suite 300<br>Chesterbrook, PA 19087                   | Web Domain<br>Web Hosting   | CAN                 |           | \$4.00       |
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| PAID CAMPAIGN WOR   | LECTIONS DEPARTMENT<br>RKERS PARTICIPATING<br>FACTIVITIES SUMMARY |  |  |  |
|---|---|--|--|--|
|   | OFFICE USE ONLY   |  |  |  |
| SHLOMO DANZINGER  | TOWN OF SURFSIDE  |  |  |  |
| I.D. Number   |   |  |  |  |
| ·   | FE810 '20 12:45PM   |  |  |  |
| Address (number and street)<br>9000 HARDING AVE   |   |  |  |  |
| City, State, Zip Code<br>SURFSIDE, FL 33154   | ·   |  |  |  |
| CHECK IF ADDRESS HAS CHANGED  |   |  |  |  |
| Candidate for:<br>Mayor<br>Commissioner, District <u>Town of Surfside</u><br>Property Appraiser<br>Clerk of the Circuit Courts<br>Community Council, Area, Su   |   |  |  |  |
|   |   |  |  |  |
| REPORT IDENTIFIERS         Report Name       2020M1       Cover Period       01/01/2020       through       01/31/2020         Report Type       Image: Original Image: O |   |  |  |  |
|   | ICATION   |  |  |  |
| It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)         certify that I have examined this report and it is true, correct, and complete.   |   |  |  |  |
| Shlomo Danzinger Shlomo Danzinger   |   |  |  |  |
| (Type name) Treasurer Deputy Treasurer  | (Type name) 🗹 Candidate       X       Signature                   |  |  |  |

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### 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 | SHLOMO DANZINGER |  |
|----------|------------------|--|
|----------|------------------|--|

FEB10 '20 12:45PM S

MIAMHDADE

COUNTY

| (3) Report Name | 2020M1 |
|-----------------|--------|
|                 |        |

\_\_\_\_\_ (4) Cover Period 01/01/2020 through 01/31/2020

(5) Report Type 🔽 Original 🔲 Amendment (6) Page 1

of <u>1</u>

| (7)<br>Row<br>Number | (8)<br>Full Name<br>(Last, Suffix, First, Middle) | (9)<br>Employed By | (10)<br>Name of Organization Employed By<br>(if not directly hired by campaign) | (11)<br>Amendment<br>Type |
|----------------------|---|--------------------|---|---------------------------|
| None                 | None  | None               | None  | None                      |
|                      |   |                    |   |                           |
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| CAMPAIGN TREASURE  | R'S REPORT SUMMARY  |
|--|---|
| (1) SHLOMO DANZINGER   | OFFICE USE ONLY   |
| Name<br>(2) 9000 HARDING AVE   | FEB21 '20 12:54PM   |
| (2) 9000 HARDING AVE<br>Address (number and street)  | TOWN OF SURFSIDE  |
| SURFSIDE, FL 33154   |   |
| City, State, Zip Code  | (3) ID Number:  |
| (4) Check appropriate box(es):   |   |
| Candidate Office Sought: Commission  | ner   |
| <ul> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul> | <ul> <li>Check here if PC or ECO has disbanded</li> <li>Check here if PTY has disbanded</li> <li>Check here if no other IE or EC reports will be filed</li> </ul> |
| (5) Repor  | t Identifiers   |
| Cover Period: From <u>02</u> / <u>01</u> /2 <u>020</u> To  | 02 / 20 /2020 Report Type: 25P1   |
| ✓ Original  Amendment  Sp  | ecial Election Report   |
| (6) Contributions This Report  | (7) Expenditures This Report  |
| Cash & Checks \$,1, 987. 61  | Monetary<br>Expenditures \$,2, 599 . 26   |
| Loans \$, <u>0</u> . <u>00</u>   | Transfers to<br>Office Account \$ , , 0 00  |
| Total Monetary \$,1, 987 61  | Total Monetary \$,2, 599 . 26   |
| In-Kind \$,, <u>0</u> .00  |   |
|  | (8) Other Distributions<br>\$,,, 0 0000   |
| (9) TOTAL Monetary Contributions To Date<br>\$,8, _45607   | (10) TOTAL Monetary Expenditures To Date<br>\$,5, <u>888</u> 45   |
|  | rtification<br>son to falsify a public record (ss. 839.13, F.S.)  |
| I certify that I have examined this report and it is true, con   | rrect, and complete:  |
| (Type name) Shlomo Danzinger   | (Type name) Shlomo Danzinger  |
| Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)  | Candidate Chairperson (only for PC and PTY)   |
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

| (1) Name                                 | O DANZINGER  |            |                                 | (2)   | I.D. Number                    |                   |                |
|--|--|------------|---------------------------------|---|--------------------------------|-------------------|----------------|
| (3) Cover Period                         | 02 / <u>01</u> / <u>2020</u>   | throu      | gh/                             | 20 / 2020                                   | (4) Page                       | 1<br>(            | 2<br>of        |
| (5)<br>Date<br>(6)<br>Sequence<br>Number | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code           | Са<br>Туре | (8)<br>ontributor<br>Occupation | (9)<br>Contribution<br>Type                 | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
| 02 .04 2020<br>/ /                       | Steven Dunn<br>11900 Biscayne Blvd,<br>Suite 600<br>Miami FL 33181                                       | I          | Attorney                        | RCT   |                                |                   | \$500.00       |
| 02 06 2020<br>/ / 2020<br>2              | Ben Jacobson<br>Campaign Account<br>9455 Collins Ave #309<br>Surfside FL 33154                           | I          | Consulting                      | RCT<br>Reimbursemen<br>Printing<br>Expenses | t                              |                   | \$168.20       |
| 02 09 2020<br>/ / / ·                    | Shmuel Levy<br>9432 Carlyle Ave<br>Surfside FL 33154<br>United States                                    | ч.         | Self Employ                     | RCT   |                                |                   | \$100.00       |
| 02 09 2020<br>                           | Shaya Farkash<br>9273 Collins Ave #405<br>Surfside FL 33154<br>United States                             | I          | Youth Prgrm                     | RCT   |                                |                   | \$18.00        |
| 02 09 2020<br>/ / /                      | Adam Ziefer.<br>916 N. 20th Ave<br>Hollywood FL 33020<br>United States                                   | I          | Sales                           | RCT   |                                |                   | \$18.00        |
| 02 11 2020<br>/ /                        | Hershy Goldberger<br>9940 W Bay Harbor Dr<br>Unit 4BS<br>Bay Harbor Islands<br>FL 33154<br>United States | I          | Software                        | RCT   |                                |                   | \$36.00        |
| 02 17 2020<br>/ /                        | Wildes & Weinberg P.C.<br>515 Madison Street<br>New York NY 10002<br>United States                       | В          | Law                             | RCT   |                                | -                 | \$500.00       |

. DS-DE 13 (Rev. 11/13)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name                         | O DANZINGER   |                    | (2)                 | I.D. Number     |           | •                  |
|----------------------------------|---|--------------------|---------------------|-----------------|-----------|--------------------|
| (3) Cover Period                 | 02 / 01 / 2020  | through            | / /                 | (4) Page        | 2         | of                 |
| (5)<br>Date<br>(6)<br>Sequence   | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &                                   | (8)<br>Contributor | (9)<br>Contribution | (10)<br>In-kind | (11)      | (12)               |
| Number<br>02 20 2020<br>/ /<br>8 | City, State, Zip Code<br>Ben Jacobson<br>Campaign Account<br>9455 Collins Ave #309<br>Surfside FL 33154 | Type Occupation    |                     | Description     | Amendment | Amount<br>\$647.41 |
| <u> </u>                         | · · · · · · · · · · · · · · · · · · ·   | •                  |                     | •               |           | •                  |
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| CAMPAIGN TREASURER'S REPORT - 17 | TEMIZED EX | XPENDITURES |
|----------------------------------|------------|-------------|
|----------------------------------|------------|-------------|

(1) Name SHLOMO DANZINGER

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

| 3) Cover Perio                                       | d / _01 / 2020 through   | / <u>20</u> / <u>2020</u> (4   | I) Page                    | of                | 2              |
|--|--|--|----------------------------|-------------------|----------------|
| (5)<br>Date<br>(6)<br>Sequence<br>Number             | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
| 02 / 04/2020   | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                                | Processing Fee   | ĊĂN                        |                   | \$20.30        |
| 02 04 2020<br>·<br>2                                 | Signs.com<br>1550 South Gladiola Street<br>Salt lake City, UT 84104                            | Printing:<br>Lawn Signs  | CAN                        |                   | \$504.60       |
| 02 05 2020<br>3                                      | Facebook, Inc.<br>1601 Willow Rad<br>Menlo Park, CA 94024-1452                                 | Advertising<br>& Marketing   | CAN                        |                   | \$25.00        |
| 02 06 2020   | Amazon.com<br>410 Terry Ave. North<br>Seattle, WA, 98109-5210                                  | Food /Drink<br>Meet & Greet<br>Campaign Event                              | CAN .                      |                   | \$49.79        |
| <sup>C2</sup> / <sup>09</sup> / <sup>2020</sup><br>5 | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                                | Processing Fee   | CAN                        |                   | \$4.30         |
| 02 09 2020<br>6                                      | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                                | Processing Fee   | CAN                        |                   | \$1.02         |
| 02 09 2020<br>7                                      | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                                | Processing Fee   | CAN                        |                   | \$1.02         |
| 02 / <sup>1·1</sup> / <sup>2020</sup>                | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                                | Processing Fee   | CAN .                      |                   | \$1.74         |

| CAMPAIGN TREASURER'S<br>(1) Name SHLOMO DANZINGER      | REPORT – ITEMIZED EXPENDITURES<br>(2) I.D. Number |  |
|--|---|--|
| (3) Cover Period $^{02}$ / $^{01}$ / $^{2020}$ through |   |  |

| · (5)                             | (7)   | (8)   | (9)                 | (10)      | (11)       |
|-----------------------------------|---|---|---------------------|-----------|------------|
| Date<br>(6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount     |
| 02 / 17/2020<br>9                 | Anedot Inc.<br>1920 McKinney Ave, 7th Floor<br>Dallas, TX 75201                         | Processing Fee  | CAN                 |           | \$20.30    |
| 02 17 2020<br>10                  | Facebook, Inc.<br>1601 Willow Rad<br>Menlo Park, CA 94024-1452                          | Advertising<br>& Marketing  | CAN                 |           | \$25.00    |
| 02 18 2020<br>11                  | Facebook, Inc.<br>1601 Willow Rad<br>Menlo Park, CA 94024-1452                          | Advertising<br>& Marketing  | CAN                 |           | \$3.97     |
| 02 18 2020                        | Print Place<br>1130 Ave H East<br>Arlington, TX 76011                                   | Printing &<br>Distribution:<br>Postcard<br>Mailers                  | CAN                 |           | \$1,369.08 |
| 02 / 19 2020<br>13                | Signs.com<br>1550 South Gladiola Street<br>Salt lake City, UT 84104                     | Printing:<br>Lawn Signs   | CAN                 |           | \$573.14   |
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| PAID CAMPAIGN WOR   | LECTIONS DEPARTMENT<br>RKERS PARTICIPATING<br>ACTIVITIES SUMMARY                  |
|---|---|
|   | OFFICE USE ONLY   |
| Name SHLOMO DANZINGER   |   |
| I.D. Number   | · .   |
| Address (number and street)<br>9000 HARDING AVE                                   |   |
| City, State, Zip Code<br>SURFSIDE, FL 33154                                       | n.  |
| CHECK IF ADDRESS HAS CHANGED  |   |
| Candidate for:  |   |
| · ·   | 2 - 4   |
| ☐ Mayor   | •   |
| Commissioner, District Town of Surfside   |   |
| Property Appraiser  |   |
| Clerk of the Circuit Courts   |   |
| 📮 Community Council, Area, Su   | b-Area  |
| REPORT IDE  | NTIFIERS  |
| Report Name 25P1 Cover Period   | 02/01/2020 through 02/20/2020   |
| Report Type 🗹 Original 🛛 Amendment  | · ·   |
| CERTIF  | ICATION   |
| . 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. |
| Shlomo Danzinger  | Shlomo Danzinger  |
| (Type name) 🛛 Treasurer 🗌 Deputy Treasurer  | (Type name) 🗹 Candidate   |
| × Malan   | x Madri   |
| Signature   | Signature   |

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### 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             | SHLOMO DANZINGER                                  |                    | (;  | 2) I.D. Number   |                           |
|----------------------|---|--------------------|---|------------------|---------------------------|
| (3) Report           | Name _25P1  | (4) Cover Period   | 02/01/2020  | through          | 2020                      |
| (5) Report           | Type 🗹 Original 🛛 Amendment                       | (6) Page _1        |   | of               |                           |
| (7)<br>Row<br>Number | (8)<br>Full Name<br>(Last, Suffix, First, Middle) | (9)<br>Employed By | (10)<br>Name of Organizat<br>(if not directly him | tion Employed By | (11)<br>Amendment<br>Type |
| None                 | None  | None               | None  | <i>2</i> .       | None                      |
|                      |   |                    |   |                  | • /                       |
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

MD-ED 26 (Rev. 03/13)

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| CAMPAIGN TREASURER'S REPORT SUMMARY  |  |  |  |  |
|--|--|--|--|--|
| (1) SHLOMO DANZINGER   | OFFICE USE ONLY  |  |  |  |
|  | 1  |  |  |  |
| (2) 9000 HARDING AVE<br>Address (number and street)  |  |  |  |  |
| SURFSIDE, FL 33154   | MAR6 '20 12:08PM   |  |  |  |
| City, State, Zip Code  |  |  |  |  |
| Check here if address has changed  | (3) ID Number:   |  |  |  |
| (4) Check appropriate box(es):<br>☑ Candidate Office Sought: Commission  | er   |  |  |  |
| ☐ Political Committee (PC)   |  |  |  |  |
| <ul> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul> | <ul> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>.</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul> |  |  |  |
| (5) Report   | Identifiers  |  |  |  |
| Cover Period: From <u>02</u> / <u>21</u> /2020 To  | 03 / 05 /2020 Report Type: 11P1  |  |  |  |
| ✓ Original   | cial Election Report   |  |  |  |
| (6) Contributions This Report  | (7) Expenditures This Report   |  |  |  |
| Cash & Checks \$,, 865.61  | Monetary<br>Expenditures \$,, 72.97  |  |  |  |
| Loans \$,, 0.00  | Transfers to<br>Office Account \$ , , 0.00   |  |  |  |
| Total Monetary \$,, 865.61   | Total Monetary \$ , 72.97  |  |  |  |
| in-Kind \$,, 000   |  |  |  |  |
|  | (8) Other Distributions  |  |  |  |
|  | \$,,, 0 0000   |  |  |  |
| (9) TOTAL Monetary Contributions To Date<br>\$,9, 32168  | (10) TOTAL Monetary Expenditures To Date<br>\$,5, _96142   |  |  |  |
| (11) Certification<br>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) Shlomo Danzinger   | (Type name) Shlomo Danzinger   |  |  |  |
| ☐ Individual (only for IE  | Candidate Chairperson (only for PC and PTY)  |  |  |  |
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DS-DE 12 (Rev. 11/13)

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

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/ \_\_\_\_ / \_\_\_\_ through

MAR6 '20 12:08PM

| (1) | Name |
|-----|------|
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SHLOMO DANZINGER

02

(2) I.D. Number

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| (3) | Cover | Period |

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(4) Page \_\_\_\_\_ of \_\_\_\_

| (5)          | (7)  |             | (8)        | (9)   | (10)        | (11)      | (12)     |
|--------------|--|-------------|------------|---|-------------|-----------|----------|
| Date         | Full Name  |             |            |   |             |           | 120 K    |
| (6)          | (Last, Suffix, First, Middle)                      | Contributor |            |   |             |           |          |
| Sequence     | Street Address &                                   |             |            | Contribution                                | In-kind     | Amendment |          |
| Number       | City, State, Zip Code                              | Туре        | Occupation | Туре  | Description | Amenument | Amount   |
| · 02 24 2020 | Iris J Herssein<br>Campaign Account                |             |            |   |             |           |          |
| , 1          | 701 94th St<br>Surfside FL 33154                   | I           | Attorney   | RCT<br>Reimbursemen<br>Printing<br>Expenses | t           |           | \$815.61 |
| 03 02 2020   | David B Karp                                       |             |            |   |             |           |          |
| 2            | 9341 Collins Ave<br>Apt. 1208<br>Surfside FL 33154 | I           | Educator   | CHE   |             |           | \$50.00  |
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## CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SHLOMO DANZINGER

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

| (3) Cover Period | 02 | _/_21 | _/_2020 | _through | 03 | _/05 | _/ 2020 | (4) Page | 1        | of   | 1    |
|------------------|----|-------|---------|----------|----|------|---------|----------|----------|------|------|
| · · · · · ·      |    |       | (7)     |          |    |      | (9)     | (0       | <b>`</b> | (10) | (11) |

|    | . (5)                             | (7)   | (8)   | (9)                 | (10)      | (11)    |
|----|-----------------------------------|---|---|---------------------|-----------|---------|
|    | Date<br>(6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount  |
|    | 1                                 | Facebook, Inc.<br>1601 Willow Rad<br>Menlo Park, CA 94024-1452                          | Advertising<br>& Marketing  | CAN                 |           | \$25.00 |
|    | 2 25 2020                         | Facebook, Inc.<br>1601 Willow Rad<br>Menlo Park, CA 94024-1452                          | Advertising<br>& Marketing  | CAN                 |           | \$35.00 |
|    | <sup>27</sup> 27 2020<br>3        | 1&1 IONOS Inc.<br>701 Lee Road<br>Suite 300<br>Chesterbrook, PA 19087                   | Web Domain<br>Web Hosting   | CAN                 |           | \$4.00  |
|    | 03 04 2020                        | PUBLIX Surfside<br>9400 Harding Ave<br>Surfside, FL 33154                               | Food /Drink<br>Meet & Greet<br>Campaign Event                       | CAN                 |           | \$8.97  |
|    |                                   |   |   |                     |           |         |
| 38 | 11                                |   |   |                     |           |         |
|    |                                   |   |   |                     |           |         |
|    | / /                               |   |   |                     |           |         |

| PAID CAMPAIGN WOR  | LECTIONS DEPARTMENT<br>RKERS PARTICIPATING<br>ACTIVITIES SUMMARY                  |
|--|---|
| Name SHLOMO DANZINGER  | OFFICE USE ONLY   |
| I.D. Number  | NAR6 '20 12:09PM  |
| Address (number and street)<br>9000 HARDING AVE  |   |
| City, State, Zip Code<br>SURFSIDE, FL 33154  |   |
| CHECK IF ADDRESS HAS CHANGED   |   |
| Candidate for:   |   |
| <ul> <li>☐ Mayor</li> <li>☑ Commissioner, District <u>Town of Surfside</u></li> <li>☐ Property Appraiser</li> <li>☐ Clerk of the Circuit Courts</li> </ul> |   |
| Community Council, Area, Su  | b-Area  |
| . REPORT IDE   |   |
| Report Name 11P1 Cover Period  | d 02/21/2020 through 03/05/2020   |
| Report Type Original Amendment   |   |
| CERTIF   | ICATION   |
| It is a first degree misdemeanor for any pers<br>I certify that I have examined this report and it is true,<br>correct, and complete.                      | I certify that I have examined this report and it is true, correct, and complete. |
| Shlomo Danzinger   | Shlomo Danzinger  |
| (Type name) Treasurer Deputy Treasurer   | (Type name) 🗹 Candidate   |
| × AlhAin   | × MA  |
| Signature  | Signature   |

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### 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.

(4) Cover Period <u>02/21/2020</u>

(1) Name SHLOMO DANZINGER

(2) I.D. Number

\_\_\_\_\_ through \_\_\_\_\_03/05/2020

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| (3) | Report | Name | 1 | 1F | י1 |
|-----|--------|------|---|----|----|
|     |        |      |   |    |    |

(5) Report Type 🛛 Original 🔲 Amendment (6) Page <u>1</u>

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\_\_\_\_\_ of \_\_\_\_\_

| (7)<br>Row<br>Number | (8)<br>Full Name<br>· (Last, Suffix, First, Middle) | (9)<br>Employed By | (10)<br>Name of Organization Employed By<br>(if not directly hired by campaign) | (11)<br>Amendment<br>Type |
|----------------------|---|--------------------|---|---------------------------|
| None                 | None  | None               | None  | None                      |
|                      |   |                    |   |                           |
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