

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

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

(PLEASE PRINT OR TYPE)

01-02-14P01:49 RCVD

Sandra Novoa

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

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

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

2. Name of Candidate (in this order: First, Middle, Last)

ELI TOURGEMAN

3. Address (include post office box or street, city, state, zip code)

*9064 BAY DR.
SUNSHINE, FL 33154*

4. Telephone

(305) 866-3663

5. E-mail address

ETRMIAHI@aol.com

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

MAYOR

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

ELI TOURGEMAN

11. Mailing Address

SAME

12. Telephone

()

13. City

14. County

15. State

16. Zip Code

17. E-mail address

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

19. Name of Bank

BANKUNITED

20. Address

12290 BISCAYNE BLVD

21. City

N MIAMI

22. County

MIAMI-DADE

23. State

FL

24. Zip Code

33181

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

25. Date

1/2/14

26. Signature of Candidate

Eli Tourgeman

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, *Eli Tourgeman*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/2/14
Date

Eli Tourgeman
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

01-02-14 P01:49 RCVD

Andra Novoa

I, *Eli TOURGEMAN*,

candidate for the office of *MAYOR*;

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

X

Eli Tourgeman

Signature of Candidate

1/2/14

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).



TOWN OF SURFSIDE

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154

GENERAL ELECTION – MARCH 18, 2014

RECEIPT OF DOCUMENTS

Candidate:

Eli

First Name

Middle Name

Tourgeman

Last name

MAYOR
Office Sought (Mayor or Commissioner)

Phone No.:

305-866-3663

Fax No.:

Cell Phone:

E-Mail Address:

ETXMIAMI@AOL.COM

This is to acknowledge my receipt of the following documents:

- Election Laws of the State of Florida (August 2013) – Digital Format (CD)
- Candidate and Campaign Treasurer Handbook (November 2013) – Digital Format (CD)
- Guide to the Sunshine Amendment and Code of Ethics (2012) – Digital Format (CD)
- Town of Surfside Ordinance Regarding Temporary Political Signs
- Miami Dade County Ordinance Regarding Political Signs
- Reporting Dates Schedule (Election Date: March 18, 2014)
- Town of Surfside Ordinance No. 2008-1493

Received by:

Eli Tourgeman
Candidate Signature

Date:

1/2/14

Sandra Novoa

From: eli.tourgeman@us.hsbc.com
Sent: Tuesday, January 14, 2014 11:37 AM
To: Sandra Novoa
Subject: change of candidacy

Ms. Novoa, Town Clerk

Please be advised that i am changing my candidacy from the office of Mayor to the office of Commissioner for the election of March 18 in the Town of Surfside.

I will complete the new required forms by days end

sincerely,

Eli Tourgeman

***** This E-mail is confidential.
It may also be legally privileged. If you are not the addressee you may not copy, forward, disclose or use any part of it. If you have received this message in error, please delete it and all copies from your system and notify the sender immediately by return E-mail. Internet communications cannot be guaranteed to be timely, secure, error or virus-free. The sender does not accept liability for any errors or omissions.

***** SAVE PAPER - THINK
BEFORE YOU PRINT!

Sandra Novoa

From: Sandra Novoa
Sent: Tuesday, January 14, 2014 11:54 AM
To: 'eli.tourgeman@us.hsbc.com'
Subject: RE: change of candidacy

Good morning Mr. Tourgeman,

I would like you to be aware of Florida Statute 106.021(1)(a):

106.021 Campaign treasurers; deputies; primary and secondary depositories.—

(1)(a) Each candidate for nomination or election to office and each political committee shall appoint a campaign treasurer. Each person who seeks to qualify for nomination or election to, or retention in, office shall appoint a campaign treasurer and designate a primary campaign depository before qualifying for office. Any person who seeks to qualify for election or nomination to any office by means of the petitioning process shall appoint a treasurer and designate a primary depository on or before the date he or she obtains the petitions. At the same time a candidate designates a campaign depository and appoints a treasurer, the candidate shall also designate the office for which he or she is a candidate. If the candidate is running for an office that will be grouped on the ballot with two or more similar offices to be filled at the same election, the candidate must indicate for which group or district office he or she is running. This subsection does not prohibit a candidate, at a later date, from changing the designation of the office for which he or she is a candidate. However, if a candidate changes the designated office for which he or she is a candidate, the candidate must notify all contributors in writing of the intent to seek a different office and offer to return pro rata, upon their request, those contributions given in support of the original office sought. This notification shall be given within 15 days after the filing of the change of designation and shall include a standard form developed by the Division of Elections for requesting the return of contributions. The notice requirement does not apply to any change in a numerical designation resulting solely from redistricting. If, within 30 days after being notified by the candidate of the intent to seek a different office, the contributor notifies the candidate in writing that the contributor wishes his or her contribution to be returned, the candidate shall return the contribution, on a pro rata basis, calculated as of the date the change of designation is filed. Up to a maximum of the contribution limits specified in s. [106.08](#), a candidate who runs for an office other than the office originally designated may use any contribution that a donor does not request be returned within the 30-day period for the newly designated office, provided the candidate disposes of any amount exceeding the contribution limit pursuant to the options in s. [106.11](#)(5)(b) and (c) or s. [106.141](#)(4)(a)1., 2., or 4.; notwithstanding, the full amount of the contribution for the original office shall count toward the contribution limits specified in s. [106.08](#) for the newly designated office. A person may not accept any contribution or make any expenditure with a view to bringing about his or her nomination, election, or retention in public office, or authorize another to accept such contributions or make such expenditure on the person's behalf, unless such person has appointed a campaign treasurer and designated a primary campaign depository. A candidate for an office voted upon statewide may appoint not more than 15 deputy campaign treasurers, and any other candidate or political committee may appoint not more than 3 deputy campaign treasurers. The names and addresses of the campaign treasurer and deputy campaign treasurers so appointed shall be filed with the officer before whom such candidate is required to qualify or with whom such political committee is required to register pursuant to s. [106.03](#).

Please let me know should you have any questions.

Thank you,

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

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

(PLEASE PRINT OR TYPE)

01/14-14A11:54 RCVD

Sandra Novoa

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

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

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

2. Name of Candidate (in this order: First, Middle, Last)

Eli TOURGEMAN

3. Address (include post office box or street, city, state, zip code)

*9064 BAY DR.
SURFSIDE, FL 33154*

4. Telephone

(305) 8663663

5. E-mail address

ETXMIAMI@AOL.COM

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

COMMISSIONER

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

Write-In No Party Affiliation _____ Party candidate.

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

10. Name of Treasurer or Deputy Treasurer

Eli TOURGEMAN

11. Mailing Address

SAME

12. Telephone

()

13. City

14. County

15. State

16. Zip Code

17. E-mail address

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

19. Name of Bank

BANKUNITED

20. Address

12290 BISCAYNE BLVD

21. City

N. MIAMI

22. County

MIAMI-DADE

23. State

FL

24. Zip Code

33181

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

25. Date

1/14/14

26. Signature of Candidate

X Eli Tourgeman

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, *Eli TOURGEMAN*, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

1/14/14
Date

X Eli Tourgeman
Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

01-14-14A11:55 RCVD

Sandra Novoa

I, ELI TOURGEMAN,

candidate for the office of COMMISSIONER;

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

X

Eli Tourgeman

Signature of Candidate

1/14/14

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).



Town of Surfside

9293 Harding Avenue
Surfside, FL 33154

2014 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate Eli Tourgeman
Office Sought Commissioner
Phone No.: _____ Cell Phone No: _____
E-Mail Address: ETX miami @ AOL.COM

<u>Contents</u>	<u>Date Received</u>	<u>Initials</u>
1. Qualifying as a candidate:		
Appointment of Campaign Treasurer and Designation of Campaign Depository	<u>1/14/2014</u>	<u>[Signature]</u>
Nominating Petition	_____	<u>[Signature]</u>
Statement of Candidate	<u>1/14/2014</u>	<u>[Signature]</u>
Sworn Statement of Qualification	_____	_____
Candidate Oath	_____	_____
Form 1 – Statement of Financial Interest (2012)	_____	_____
Declaration for Candidate Automatically Covered by MDC Ordinance 98-94 or Declaration for Candidates Not Automatically Covered by MDC Ordinance 98-94	_____	_____
Qualifying Fee \$25.00	_____	_____

Proof of Residency
& Voter Registration

2. Important Dates to Remember

1/2/2014

B

FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME:

TOURGEMAN, ELI

MAILING ADDRESS:

9064 BAY DR.

CITY:

SURFSIDE, FL

ZIP:

33154

COUNTY:

MIAMI-Dade

NAME OF AGENCY:

TOWN OF SURFSIDE

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

MAYOR

02-10-14P04:24 RCVD

Sandra Novoa.

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

**** BOTH PARTS OF THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2012 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING:

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]

(If you have nothing to report, you must write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
HSBC BANK	9501 HARDING AVE SURFSIDE, FL 33154	BANKING

PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, you must write "none" or "n/a")

9033 DIKREUS AVE - SURFSIDE - HOME
100 BAYVIEW DR. #1228 CONDO
944 SW 4 ST #409 CONDO
13020 SW 92 AVE CONDO

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
 (If you have nothing to report, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
N/A	

PART E — LIABILITIES [Major debts - See instructions]
 (If you have nothing to report, you must write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
N/A	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
 (If you have nothing to report, you must write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY	N/A		
PRINCIPAL BUSINESS ACTIVITY	N/A		
POSITION HELD WITH ENTITY	N/A		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	N/A		
NATURE OF MY OWNERSHIP INTEREST	N/A		

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required):

DATE SIGNED (required):

[Handwritten Signature]

2/10/14

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form, **including signing and dating it**, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

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 for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2012.



TOWN OF SURFSIDE 02-10-14P04:33 RCVD

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154

GENERAL ELECTION - MARCH 18, 2014

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 }

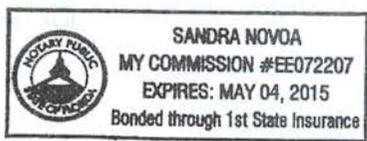
COUNTY OF MIAMI-DADE }

TOWN OF SURFSIDE }

I solemnly swear (or affirm) under oath, that my name is Eli Tourgenan, 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 9064 Bay Dr., my occupation is BANKER; that I have been a resident of the Town of Surfside since 1925; that I will be at least twenty-one (21) years of age by February 11, 2014 and that if elected, I will willingly serve as Commissioner (Mayor or Commissioner) of the Town of Surfside, if elected.

Signature of Candidate: [Handwritten Signature] Date: 2/10/14

Sworn to and subscribed before me this 10th day of February, 2014.



[Handwritten Signature]
NOTARY PUBLIC
Sandra Novoa
PRINTED NAME OF NOTARY

DECLARATION FOR CANDIDATES NOT AUTOMATICALLY COVERED

by the **Mandatory Provisions** of the
Miami-Dade Ethical Campaign Practices Ordinance
Miami-Dade County Code at 2-11.1.1(C) (1)

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

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

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

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

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

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

I, Eli TOURGEMAN, a candidate for the office of
please print your name
COMMISSIONER in SURFSIDE
elective office sought county, municipality, or other jurisdiction

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

 2/10/14
Signature Date

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

02-10-14P04:25 RCVD

Sandra Novoa
02-10-14P04:25 RCVD

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

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

am a candidate for the nonpartisan office of COMMISSIONER, _____
(office) (district #)
_____ ; I am a qualified elector of MIAMI-DADE County, Florida;
(circuit #) (group or seat #)

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

X *Eli Tourgeman* 305 866-3663
Signature of Candidate Telephone Number Email Address
9064 BAY DR. SURFSIDE FL 33154
Address City State ZIP Code

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

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

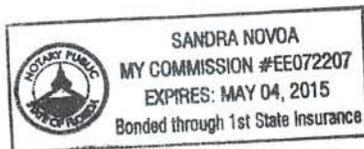
STATE OF FLORIDA
COUNTY OF Miami Dade.

Sworn to (or affirmed) and subscribed before me this 10 day of February, 2014.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____



Sandra Novoa, Sandra Novoa
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

ELI TOURGEMAN CAMPAIGN ACCOUNT
9064 BAY DR.
SURFSIDE, FL 33154

63-9059/2670

116

DATE 2/11/14

© 2014 BankUnited.com/cheq

PAY TO
THE ORDER OF

TOWN OF SURFSIDE

\$25⁰⁰/₁₀₀

Twenty Five & 00/100

DOLLARS



Security Features
Included
Check on BUA

BankUnited 1-877-779-2265
www.bankunited.com



Diamond Checking Account

Eli Tourgeman

MEMO

MP

⑆ 267090594⑆ 9853091447⑈ 0116

SPECIALTY GRAY



TOWN OF SURFSIDE
Office of the Town Clerk

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra Novoa, CMC, Town Clerk

January 29, 2014

Ms. Rosy Pastrana
Miami-Dade Elections Department
2700 NW 87th Avenue
Miami, FL 33172

RE: VERIFICATION OF PETITION SIGNATURES – ELI TOURGEMAN

Dear Ms. Pastrana:

Enclosed are the original petition forms for ELI TOURGEMAN. This petition is for a candidate seeking to qualify for office in the TOWN OF SURFSIDE. The City Charter, under section 101 requires the verification of 25 signatures in order for the petition to be sufficient. Please verify signatures in accordance with the Town of Surfside Charter.

ELI TOURGEMAN: Filed intent to run for office on January 2, 2014.

The City Charter, under section 101 requires the City Clerk to notify the candidate within five days whether the required number of electors signed the petition.

Please return the original petition forms to us along with a certificate certifying the number of valid signatures.

Sincerely,

Sandra Novoa, CMC
Town Clerk



02-10-14P04:33 RCVD

Town of Surfside

9293 Harding Avenue
Surfside, FL 33154

2014 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate Eli Turgeman.

Office Sought Mayor.

Phone No.: _____ Cell Phone No: _____

E-Mail Address: ETX MIAMI @ AOL.COM

<u>Contents</u>	<u>Date Received</u>	<u>Initials</u>
1. Qualifying as a candidate:		
Appointment of Campaign Treasurer and Designation of Campaign Depository	<u>1/2/2014.</u>	<u>[Signature]</u>
Nominating Petition	<u>2/10/2014</u>	<u>[Signature]</u>
Statement of Candidate	<u>1/2/2014.</u>	<u>[Signature]</u>
Sworn Statement of Qualification	<u>2/10/2014</u>	<u>[Signature]</u>
Candidate Oath	<u>2/10/2014.</u>	<u>[Signature]</u>
Form 1 – Statement of Financial Interest (2012)	<u>2/10/2014</u>	<u>[Signature]</u>
Declaration for Candidate Automatically Covered by MDC Ordinance 98-94 or Declaration for Candidates Not Automatically Covered by MDC Ordinance 98-94	<u>2/10/2014</u>	<u>[Signature]</u>
Qualifying Fee \$25.00	<u>2/10/2014</u>	<u>[Signature]</u>

Proof of Residency
& Voter Registration

2. Important Dates to Remember

1/2/2014 [Signature]

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Eli A Tourgeman
 Name
 (2) 9064 Bay Drive
 Address (number and street)
Surfside, FL 33154
 City, State, Zip Code

OFFICE USE ONLY

02-03-14A11:23 RCVD

Landra Novoa

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 01 / 01 / 2014 To 01 / 31 / 2014 Report Type: 2014 M1

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, 2 , 723 . 00

Loans \$, , .

Total Monetary \$, 2 , 723 . 00

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , .

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 2 , 723 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , .

(11) Certification

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

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

(Type name) Eli A Tourgeman

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

X *Eli A Tourgeman*
 Signature

(Type name) Eli A Tourgeman

Candidate Chairperson (only for PC and PTY)

X *Eli A Tourgeman*
 Signature

Instructions for Campaign Treasurer's Report Summary

- (1) **Name:** full name of the candidate, political committee, party executive committee, electioneering communications organization, or individual making an independent expenditure or electioneering communication.
 - (2) **Address:** the full address or post office box, city, state, and zip code.
 Check the box if the address has changed since the last report filed.
 - (3) **ID Number:** identification number assigned by the filing officer.
 - (4) **Check the appropriate box(es).**
 - (5) **Report Identifiers**
Cover Period: the dates this report covers (i.e., From 1/1/15 To 1/31/55). **Important:** use the appropriate cover period dates as published by the filing officer.
Report Type: refer to the filing officer's calendar of reporting dates for the correct codes to be used for each reporting period. If report is for a **special election** add "S" in front of the report code (i.e., SG3).
Check one of the appropriate boxes:
 Original: first report filed for this reporting period.
 Amendment: must summarize only contributions/fund transfers and expenditures/distributions being reported as additions or deletions. Read instructions for sequence numbers and amendment types on the back of Forms DS-DE 13A and 14A.
 Special Election Report: **Important:** once a special election report is filed, the entity is required to file all remaining reports due for the special election.
 - (6) **Contributions This Report:**
Cash and Checks: total amount for this reporting period.
Loans: total amount for this reporting period.
Total Monetary: sum of Cash and Checks and Loans.
In-Kind: the fair market value of the in-kind contribution at the time it is given for this reporting period.
 - (7) **Expenditures This Report:**
Monetary Expenditures: total amount of monetary expenditures for this reporting period.
Transfers to Office Account: total amount transferred to an office account by elected candidates only.
Total Monetary: sum of Monetary Expenditures and Transfers to Office Account.
 - (8) **Other Distributions:** the total amount of goods and services contributed to a candidate or other committee by a PC, ECO, or PTY.
 - (9) **TOTAL Monetary Contributions To Date:** the amount of total monetary contributions to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
 - (10) **TOTAL Monetary Expenditures To Date:** the amount of total monetary expenditures to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
 - (11) **Type or print the required officer's name and have them sign the report:**
 Candidate report: treasurer and candidate must sign.
 PC report: treasurer and chairperson must sign.
 PTY report: treasurer and chairperson must sign.
 ECO report: organization's treasurer must sign.
 IE or EC report: individual must sign (this applies when an individual acts alone to make these expenditures)
- AMENDMENT REPORTS:** An amendment report summary should summarize only contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94.

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ELI A TOURGEMAN (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2014 through 01 / 31 / 2014 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
01/03/2014 / / 1	Bengio, Jaymy 8951 Byron Avenue Surfside, FL 33154	I	Banker	CAS	N/A	N/A	\$100.00
01/10/2014 / / 2	Geld, Bruce 9553 Harding Avenue Surfside, FL 33154	I	Promotions	CHE	N/A	N/A	\$500.00
01/15/2014 / / 3	Cine Citta Cafe I, LLC 9544 Harding Avenue Surfside, FL 33154	B	Restaurant	CHE	N/A	N/A	\$200.00
01/15/2014 / / 4	Ricardo de Armas 9381 Byron Avenue Surfside, FL 33154	I	Retired	CAS	N/A	N/A	\$10.00
01/15/2014 / / 5	Nico Aguirre 9416 Abbott Avenue Surfside, FL 33154	I	Retired	CAS	N/A	N/A	\$100.00
01/17/2014 / / 6	Boris & Jeanne Rosen 1399 Biscaya Drive Surfside, FL 33154	I	CPA	CHE	N/A	N/A	\$250.00
01/23/2014 / / 7	Lotus Miami 9487 Harding Avenue Surfside, FL 33154	B	Restaurant	CHE	N/A	N/A	\$100.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Eli A Tourgeman (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2014 through 01 / 31 / 2014 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
01 / 23 / 2014	B and H Pizza 233 95th Street Surfside, FL 33154	B	Restaura nt	CHE	N/A	N/A	\$360.00
8							
01 / 23 / 2014	Alfredo E Pinate 262 95th Street Surfside, FL 33154	I	Owner of Dry Cleaner	CHE	N/A	N/A	\$25.00
9							
01 / 23 / 2014	Gray & Sons South FL Gold & Silver Exchange Inc. 9595 Harding Ave Surfside, FL 33154	B	Jewelry Store	CHE	N/A	N/A	\$1,000.00
10							
01 / 23 / 2014	Jessica Bazan 9473 Harding Avenue Surfside, FL 33154	I	Card Retaile r	CAS	N/A	N/A	\$50.00
11							
01 / 23 / 2014	Aramis Amor 9431 Harding Avenue Surfside, FL 33154	I	Barber	CAS	N/A	N/A	\$10.00
12							
01 / 23 / 2014	Patricia Kleiner 9429 Harding Avenue Surfside, FL 33154	I	Mail Service s	CAS	N/A	N/A	\$10.00
13							
01 / 23 / 2014	Mirta Cam 9463 Harding Avenue Surfside, FL 33154	I	Dry Cleaners Worker	CAS	N/A	N/A	\$5.00
14							
01 / 23 / 2014	Food Among the Flowers	B	Flower Store	CAS	N/A	N/A	\$3.00
15							

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



OFFICE USE ONLY

Name Eli TOURGEMAN

I.D. Number _____

Address (number and street) 9064 BAY DR.

City, State, Zip Code SURFSIDE, FL 33154

02-03-14A11:24 RCVD

CHECK IF ADDRESS HAS CHANGED

Candidate for:

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

REPORT IDENTIFIERS

Report Name 2014M1 Cover Period 01/01/2014 through 01/31/2014

Report Type Original Amendment

CERTIFICATION

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

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

Eli Tourgeman
(Type name) Treasurer Deputy Treasurer

X Eli Tourgeman
Signature

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

Eli Tourgeman
(Type name) Candidate

X Eli Tourgeman
Signature

02-03-14A11:24 RCVD SKN



miamidade.gov

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

February 11, 2014

Sandra Novoa, CMC
Town of Surfside
9293 Harding Avenue
Surfside, FL 33154-3009

Dear Ms. Novoa:

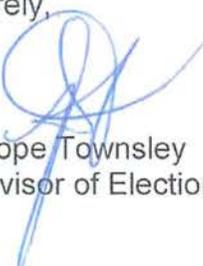
The Miami-Dade Elections Department has completed the verification of the petitions for Eli Tourgeman, a candidate for Commissioner in the Town of Surfside. A total of 26 petitions were reviewed for verification; of which 25 were certified.

The Miami-Dade County Charter requires this process to include the following. For purposes of signature verification, however my office does not review this information, and encourages the municipality to ensure compliance with municipal charter or code requirements.

- Title not being in English, Spanish, and Creole
- Circulator was not a registered voter in Miami-Dade County
- Notary did not comply with F.S. 117.05
- Notary was the same person as the circulator
- Signatures of the circulator and the notary were dated earlier than any of the dates on which the electors signed the petition

As such, please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Rosy Pastrana, Deputy Supervisor of Elections for Voter Services at 305-499-8548.

Sincerely,



Penelope Townsley
Supervisor of Elections

Enclosure (1)



miamidade.gov

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

CERTIFICATION

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, Penelope Townsley, Supervisor of Elections of Miami-Dade County, Florida, do hereby certify that 25 signatures submitted by Eli Tourgeman for the office of Commissioner in the Town of Surfside matched the signatures on the voter files.

WITNESS MY HAND
AND OFFICIAL SEAL,
AT MIAMI, MIAMI-DADE
COUNTY, FLORIDA,
ON THIS 11th DAY OF
FEBRUARY, 2014

A handwritten signature in blue ink, appearing to be "Penelope Townsley", written over a horizontal line.

Penelope Townsley
Supervisor of Elections

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Eli A Tourgeman

Name

(2) 9064 Bay Drive

Address (number and street)

Surfside, FL 33154

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

02-03-14A11:23 RCVD

Landra Novoa

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 01 / 01 / 2014 To 01 / 31 / 2014 Report Type: 2014 M1

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, 2 , 723 . 00

Loans \$, , .

Total Monetary \$, 2 , 723 . 00

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , .

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 2 , 723 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , .

(11) Certification

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

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

(Type name) Eli A Tourgeman

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

X *Eli A Tourgeman*

Signature

(Type name) Eli A Tourgeman

Candidate Chairperson (only for PC and PTY)

X *Eli A Tourgeman*

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ELI A TOURGEMAN (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2014 through 01 / 31 / 2014 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
01/03/2014 / /	Bengio, Jaymy 8951 Byron Avenue Surfside, FL 33154	I	Banker	CAS	N/A	N/A	\$100.00
1							
01/10/2014 / /	Geld, Bruce 9553 Harding Avenue Surfside, FL 33154	I	Promotions	CHE	N/A	N/A	\$500.00
2							
01/15/2014 / /	Cine Citta Cafe I, LLC 9544 Harding Avenue Surfside, FL 33154	B	Restaurant	CHE	N/A	N/A	\$200.00
3							
01/15/2014 / /	Ricardo de Armas 9381 Byron Avenue Surfside, FL 33154	I	Retired	CAS	N/A	N/A	\$10.00
4							
01/15/2014 / /	Nico Aguirre 9416 Abbott Avenue Surfside, FL 33154	I	Retired	CAS	N/A	N/A	\$100.00
5							
01/17/2014 / /	Boris & Jeanne Rosen 1399 Biscaya Drive Surfside, FL 33154	I	CPA	CHE	N/A	N/A	\$250.00
6							
01/23/2014 / /	Lotus Miami 9487 Harding Avenue Surfside, FL 33154	B	Restaurant	CHE	N/A	N/A	\$100.00
7							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Eli A Tourgeman (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2014 through 01 / 31 / 2014 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
01 / 23 / 2014	B and H Pizza 233 95th Street Surfside, FL 33154	B	Restaura nt	CHE	N/A	N/A	\$360.00
8							
01 / 23 / 2014	Alfredo E Pinate 262 95th Street Surfside, FL 33154	I	Owner of Dry Cleaner	CHE	N/A	N/A	\$25.00
9							
01 / 23 / 2014	Gray & Sons South FL Gold & Silver Exchange Inc. 9595 Harding Ave Surfside, FL 33154	B	Jewelry Store	CHE	N/A	N/A	\$1,000.00
10							
01 / 23 / 2014	Jessica Bazan 9473 Harding Avenue Surfside, FL 33154	I	Card Retailer	CAS	N/A	N/A	\$50.00
11							
01 / 23 / 2014	Aramis Amor 9431 Harding Avenue Surfside, FL 33154	I	Barber	CAS	N/A	N/A	\$10.00
12							
01 / 23 / 2014	Patricia Kleiner 9429 Harding Avenue Surfside, FL 33154	I	Mail Service s	CAS	N/A	N/A	\$10.00
13							
01 / 23 / 2014	Mirta Cam 9463 Harding Avenue Surfside, FL 33154	I	Dry Cleaners Worker	CAS	N/A	N/A	\$5.00
14							
01 / 23 / 2014	Food Among the Flowers	B	Flower Store	CAS	N/A	N/A	\$3.00
15							

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



OFFICE USE ONLY

Name Eli TOURGEMAN

I.D. Number _____

Address (number and street) GOLF BAY DR.

City, State, Zip Code SURFSIDE, FL 33154

02-03-14A11:24 RCVD

CHECK IF ADDRESS HAS CHANGED

Candidate for:

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

REPORT IDENTIFIERS

Report Name 2014M1 Cover Period 01/01/2014 through 01/31/2014

Report Type Original Amendment

CERTIFICATION

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

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

Eli Tourgeman
(Type name) Treasurer Deputy Treasurer

X Eli Tourgeman
Signature

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

Eli Tourgeman
(Type name) Candidate

X Eli Tourgeman
Signature

02-03-14A11:24 RCVD SKN

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Eli A Tourgeman
 Name
9064 Bay Drive
 Address (number and street)
Surfside, FL 33154
 City, State, Zip Code

OFFICE USE ONLY

02-18-14P01:40 RCVD

Jandra Novoa

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 02 / 01 / 14 To 02 / 14 / 14 Report Type: 25 Days Prior

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 300 . 00

Loans \$, , .

Total Monetary \$, 1 , 300 . 00

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , 281 . 42

Transfers to Office Account \$, , .

Total Monetary \$, , 281 . 42

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 4 , 023 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 281 . 42

(11) Certification

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

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

(Type name) Eli A Tourgeman

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

X *Eli A Tourgeman*
 Signature

(Type name) Eli A Tourgeman

Candidate Chairperson (only for PC and PTY)

X *Eli A Tourgeman*
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Eli A Tourgeman (2) I.D. Number _____

(3) Cover Period 02 / 01 / 2014 through 02 / 14 / 2014 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
02 / 12 / 14 1	Gary L Curson D.P.M., P.A. 9528 Harding Avenue Surfside, FL 33154	B	Podiatry	CHE	N/A	N/A	\$100.00
02 / 13 / 14 2	Oberle Opticians 9552 Harding Avenue Surfside, FL 33154	B	Optician	CHE	N/A	N/A	\$500.00
02 / 14 / 14 3	Bakker, Pieter 8818 Hawthorne Avenue Surfside, FL 33154	I	Real-Estate	CAS	N/A	N/A	\$100.00
02 / 14 / 14 4	Hirsch, Sandra 9850 E Bay Harbor Dr, Apt 1 Bay Harbor Islands, FL 33154	I	Cashier	CHE	N/A	N/A	\$500.00
02 / 14 / 14 5	Specchio Gourmet, Inc. 9485 Harding Avenue Surfside, FL 33154	B	Restaurant	CHE	N/A	N/A	\$100.00
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Eli A Tourgeman

(2) I.D. Number _____

(3) Cover Period 02 / 01 / 2014 through 02 / 14 / 2014

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
02 / 11 / 14 1	Town of Surfside 9293 Harding Avenue Surfside, FL 33154	QUALIFYING FEE	CAN	N/A	\$25.00
02 / 12 / 14 2	Eli Tourgeman 9064 Bay Drive Surfside, FL 33154	Office Supplies	CAN	N/A	\$256.42

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



OFFICE USE ONLY

Name ELI TOURGEMAN

I.D. Number _____

Address (number and street) 9064 BAY DR.

City, State, Zip Code SURFSIDE, FL 33154

CHECK IF ADDRESS HAS CHANGED

02-18-14P01:40 RCVD

Jandra Lovoa

Candidate for:

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

REPORT IDENTIFIERS

Report Name 25 days prior Cover Period 2/1/14 through 2/14/14

Report Type Original Amendment

CERTIFICATION

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

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

ELI TOURGEMAN

(Type name) Treasurer Deputy Treasurer

X *Eli Tourgeman*
Signature

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

ELI TOURGEMAN

(Type name) Candidate

X *Eli Tourgeman*
Signature

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



OFFICE USE ONLY

Name Eli TOURGEMAN

I.D. Number _____

Address (number and street) 9064 BAY DR.

City, State, Zip Code SURESIDE, FL 33154

CHECK IF ADDRESS HAS CHANGED

03-12-14 P02:09 RCVD
Sandra Nowak

Candidate for:

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

REPORT IDENTIFIERS

Report Name 4 days Period Cover Period 03/1/14 through 03/13/14

Report Type Original Amendment

CERTIFICATION

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

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

Eli TOURGEMAN

(Type name) Treasurer Deputy Treasurer

X [Signature]
Signature

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

Eli TOURGEMAN

(Type name) Candidate

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Eli A Tourgeman
 Name
 (2) 9064 Bay Drive
 Address (number and street)
Surfside, FL 33154
 City, State, Zip Code

OFFICE USE ONLY

03-12-14P01:58 RCVD

Sandra Novoa

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 03 / 01 / 14 To 03 / 13 / 14 Report Type: 4 days prior

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 500 . 00

Loans \$, , .

Total Monetary \$, 1 , 500 . 00

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , 376 . 67

Transfers to Office Account \$, , .

Total Monetary \$, , 376 . 67

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 7 , 003 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 2 , 511 . 11

(11) Certification

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

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

(Type name) Eli A Tourgeman
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X *Eli A Tourgeman*
 Signature

(Type name) Eli A Tourgeman
 Candidate Chairperson (only for PC and PTY)

X *Eli A Tourgeman*
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Eli A Tourgeman (2) I.D. Number _____

(3) Cover Period 03 / 01 / 14 through 03 / 13 / 14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
03 / 07 / 14 1	Fischer, Walter G 3598 Yacht Club Dr, Apt 2001 Aventura, FL 33180	I	Accountant	CHE	N/A	N/A	\$500.00
03 / 07 / 14 2	Hollender, Karina 21396 Marina Court Cir, Apt 17-J Aventura, FL 33180	I	Housewife	CHE	N/A	N/A	\$500.00
03 / 07 / 14 3	Sotolongo, Daisy M 3789 NE 170th Street, Apt A-2 North Miami Beach, FL 33160	I	Admin Asst	CHE	N/A	N/A	\$500.00
/ /							
/ /							
/ /							
/ /							
/ /							

03-12-14P01:58 RCVD *Sen.*

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Eli A Tourgeman

(2) I.D. Number _____

(3) Cover Period 03 / 01 / 14 through 03 / 13 / 14

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
03 / 03 / 14 1	Board of County Commissioners 111 NW 1st Street, Ste 200 Miami, FL 33128	Election Reports	CAN	N/A	\$60.00
03 / 05 / 14 2	Office Max 12255 Biscayne Blvd North Miami, FL 33181	Thank You Cards	CAN	N/A	\$40.56
03 / 05 / 14 3	Tourgeman, Eli A 9064 Bay Drive Surfside, FL 33154	Reimbursement for T-Shirt purchased by Eli Tourgeman with www.boltprinting.co m	CAN	N/A	\$55.92
03 / 05 / 14 4	Postmaster 250 95th Street Surfside, FL 33154	Stamps	CAN	N/A	\$98.00
03 / 05 / 14 5	Petty Cash 9064 Bay Drive Surfside, FL 33154	Supplies for Election Day	CAN	N/A	\$25.00
03 / 07 / 14 6	Costco 14585 Biscayne Blvd North Miami, FL 33181	Refreshments for Election Day	CAN	N/A	\$66.79
03 / 07 / 14 7	Tourgeman, Eli A 9064 Bay Drive Surfside, FL 33154	Reimbursement for gas expense	CAN	N/A	\$30.40

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Eli A Tourgeman
 Name
 (2) 9064 Bay Drive
 Address (number and street)
Surfside, FL 33154
 City, State, Zip Code

OFFICE USE ONLY

P. Kuntala
 TOWN OF SURFSIDE
 MAR27'14 9:31AM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 03 / 14 / 2014 To 03 / 27 / 2014 Report Type: Termination

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 4 , 491 . 89

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

Total Monetary \$ _____ , 4 , 491 . 89

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 7 , 003 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 7 , 003 . 00

(11) Certification

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

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

(Type name) Eli A Tourgeman

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

X *Eli A Tourgeman*
 Signature

(Type name) Eli A Tourgeman

Candidate Chairperson (only for PC and PTY)

X *Eli A Tourgeman*
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Eli A Tourgeman

(2) I.D. Number _____

(3) Cover Period 03 / 14 / 2014 through 03 / 27 / 2014

(4) Page 1 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
03 / 18 / 14	Tourgeman, Eli A 9064 Bay Drive Surfside, FL 33154	Victory Party	CAN	N/A	\$531.00
1					
03 / 26 / 14	Bengio, Jaymy 8951 Byron Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
2					
03 / 26 / 14	Geld, Bruce 9553 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$282.80
3					
03 / 26 / 14	Cine Citta Cafe I, LLC 9544 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$113.12
4					
03 / 26 / 14	de Armas, Ricardo 9381 Byron Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$5.66
5					
03 / 26 / 14	Aguirre, Nico 9416 Abbott Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
6					
03 / 26 / 14	Rosen, Boris & Jeanne 1399 Biscaya Drive Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$141.40
7					
03 / 26 / 14	Lotus Miami 9487 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
8					

PK

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Eli A Tourgeman

(2) I.D. Number _____

(3) Cover Period 03 / 14 / 2014 through 03 / 27 / 2014

(4) Page 3 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
03 / 18 / 14	Gary L Curson D.P.M., P.A. 9528 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
17					
03 / 26 / 14	Oberle Opticians 9552 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$282.80
18					
03 / 26 / 14	Bakker, Pieter 8818 Hawthorne Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
19					
03 / 26 / 14	Hirsch, Sandra 9580 E Bay Harbor Drive, Apt 1 Bay Harbor Islands, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$282.80
20					
03 / 26 / 14	Specchio Gourmet, Inc. 9485 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
21					
03 / 26 / 14	Sabates, Feliciano & Manty 9401 Collins Avenue, Apt 1202 Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$565.60
22					
03 / 26 / 14	Harding Salon 9564 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$113.12
23					
03 / 26 / 14	Shalimar Enterprise of Miami, DBA Subway 9536 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$56.56
24					

AK

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Eli A Tourgeman

(2) I.D. Number _____

(3) Cover Period 03 / 14 / 2014 through 03 / 27 / 2014

(4) Page 2 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
03 / 18 / 14	B and H Pizza 233 95th Street Surfside, FL 33154	Prorated Refund to the Contributor			
9			REF	N/A	\$203.62
03 / 26 / 14	Pinate, Alfredo E 262 95th Street Surfside, FL 33154	Prorated Refund to the Contributor			
10			REF	N/A	\$14.14
03 / 26 / 14	Gray & Sons South Florida Gold & Silver Exchange Inc. 9595 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor			
11			REF	N/A	\$565.60
03 / 26 / 14	Bazan, Jessica 9473 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor			
12			REF	N/A	\$28.28
03 / 26 / 14	Amor, Aramis 9431 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor			
13			REF	N/A	\$5.66
03 / 26 / 14	Kleiner, Patricia 9429 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor			
14			REF	N/A	\$5.66
03 / 26 / 14	Cam, Mirta 9463 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor			
15			REF	N/A	\$2.83
03 / 26 / 14	Food Among the Flowers 9427 Harding Avenue Surfside, FL 33154	Prorated Refund to the Contributor			
16			REF	N/A	\$1.70

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Eli A Tourgeman

(2) I.D. Number _____

(3) Cover Period 03 / 14 / 2014 through 03 / 27 / 2014

(4) Page 4 of 4

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
03 / 26 / 14	Sheridan Wealth Advisors, Inc 1108 Kane Concourse, Ste 307 Bay Harbor Islands, FL 33154	Prorated Refund to the Contributor	REF	N/A	\$101.61
25					
03 / 26 / 14	Fischer, Walter G 3598 Yacht Club Drive, Apt 2001 Aventura, FL 33180	Prorated Refund to the Contributor	REF	N/A	\$282.79
26					
03 / 26 / 14	Hollender, Karina 21396 Marina Court Circle, Apt 17-J Aventura, FL 33180	Prorated Refund to the Contributor	REF	N/A	\$282.79
27					
03 / 26 / 14	Sotolongo, Daisy M 3789 NE 170th Street, Apt A-2 North Miami Beach, FL 33160	Prorated Refund to the Contributor	REF	N/A	\$282.79
28					
///					
///					
///					
///					

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



OFFICE USE ONLY

Name ELI TOURGEMAN

I.D. Number 90 DAYS AFTER Election (FINAL)

Address (number and street) 9061 BAY DR.

City, State, Zip Code SURFSIDE, FL 33154

CHECK IF ADDRESS HAS CHANGED

P. Kuntale
TOWN OF SURFSIDE

MAR 27 '14 9:35AM

Candidate for:

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

REPORT IDENTIFIERS

Report Name 90 DAYS AFTER Election Cover Period 3/14/14 through 3/27/14
FINAL

Report Type Original Amendment

CERTIFICATION

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

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

ELI TOURGEMAN
(Type name) Treasurer Deputy Treasurer

X *Eli Tourgeman*
Signature

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

ELI TOURGEMAN
(Type name) Candidate

X *Eli Tourgeman*
Signature

