

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE

(1) Yamton Viji Assidan
Name

(2) 824 Newborn Terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

17 JAN 20 AM 9:10

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Sunrise City Commissioner Group A

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 11 / 4 / 16 To 1 / 5 / 17 Report Type: TR

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0.00

Loans \$, , 0.00

Total Monetary \$, , 0.00

In-Kind \$, , 0.00

(7) Expenditures This Report

Monetary Expenditures \$, 22,507.79

Transfers to Office Account \$, , 0.00

Total Monetary \$, 22,507.79

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 44,491.82

(10) TOTAL Monetary Expenditures To Date

\$, 44,491.82

(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) Yael Assidan

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

X [Signature]

Signature

(Type name) Yamton Viji Assidan

Candidate Chairperson (only for PC and PTY)

X ASSIDAN

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yannou Vni Assidon

(2) I.D. Number 17 JAN 20 AM 9:10

(3) Cover Period 11 / 4 / 16 through / /

(4) Page 1 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11/6/16 1	Publix 10155 W Oakland Pk Blvd Sunrise FL 33351	campaign supplies	MON		22.32
11/8/16 2	Publix 12500 W Sunrise Blvd. Sunrise FL 33323	campaign supplies	MON		132.73.
11/8/16 3	Publix 12500 W Sunrise Blvd. Sunrise FL 33323.	campaign supplies	MON		2.11
11/7/16 4	Artworks Printing 5922 Lee St. Hollywood FL 33021	T-shirt printing	MON		132.50.
11/7/16 5	Pearl Lyon, Sybil.	campaign staff.	MON.		460.00
11/7/16 6	COSTCO 1890 S. University Dr. Dane FL 33324	campaign supplies	MON		151.73
11/8/16 7	Shell 251 NW 136th Ave. Sunrise FL 33325	campaign gas supplies	MON		32.49
11/10/16 8	Pearl Lyon, Sybil	campaign staff	MON		120.00.

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yumtov Vivi Assidan

(2) I.D. Number 17 JAN 20 AM 9:10

(3) Cover Period 11/4/16 through 1/1/17

(4) Page 2 of 3

(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
11/17/14	Westside 11524 W State Rd 84 Dade FL 33325	Mailing for Campaign	MON		6.85.
9					
11/24/14	Ivory, Kenneth	Campaign Staff	MON		80.00
10	-				
11/17/16	Assidan, Yumtov 824 NW 130th Terrace. Sunrise FL 33325	Returned Campaign 1097	MON		20,000.00
11					
11/6/16	Thurston, Raymond	Campaign Staff	MON		225.00.
12					
11/5/14	Thurston, Raymond.	Campaign Staff	MON.		60.00
13					
11/7/14	Bollo Pipico 5011 S. State Rd 7. Dade FL 33314	Campaign Food Supplies	MON		307.40
14					
11/6/16	ATM service charge	ATM service charge.	MON		1.50
15					
12/05/14.	Assidan Assidan, Yumtov 824 NW 130th Terrace Sunrise FL 33325	Return of 1097 Campaign	MON.		261.45.
16.					

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yantow, Vivi Assidon

(2) I.D. Number 17 JAN 20 AM 9:10

(3) Cover Period 11/4/16 through 1/1/17

(4) Page 3 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11/29/16	Assidon, Vivi 824 NW 130th Terr Sunrise FL 33325	Campaign advertising	MON.		131.71
17					
11/4/16	Ivory, Kenneth	campaign staff	MON		140.00
18	-				
11/4/16	Thurston, Raymond	campaign staff	MON		140.00
19					
11/7/16	Labrente, Rodrick	campaign staff	MON		40.00
20					
1/1					
1/1					
1/1					
1/1					

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE
16 NOV -4, AM 11:45

(1) Yonituv VIVI Assidon
Name

(2) 804 NW 130th terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A
- 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 10 / 22 / 16 To 11 / 3 / 16 Report Type: 67

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 2,890.00

Loans \$.00

Total Monetary \$ 2,890.00

In-Kind \$.00

(7) Expenditures This Report

Monetary Expenditures \$ 2,898.65

Transfers to Office Account \$.00

Total Monetary \$ 2,898.65

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 44,491.82

(10) TOTAL Monetary Expenditures To Date

\$ 21,549.56

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yonituv VIVI Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yaniter Vivid Assidom (2) I.D. Number _____

(3) Cover Period 10/22/14 through 11/3/14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
11/1/14	Dumar, Hillsburgh, Layston, Vaght Adair 1177 SE 3rd Ave. Pt Lauderdale FL 33316	B.	Attorney.	CHE	N		750.00
1							
11/2/14	David H Sarvestani PO Box 82592 Pembroke Pines, FL 33082.	I	resident	CHE	N.		40.00
2							
10/27/14	Realists Political Advocacy Committee 7055 Augusta National Drive Orlando FL 32822	P	Realtors	CHE	N.		1,000.00
3							
11/3/14	Grande Consulting Inc. Vinnie Grande. PO BOX 246076 Pembroke Pines FL 33029	B.	consulting firm.	CHE.	N.		250.00
4							
10/25/14	MBA Development Partners LLC. 433 Plaza Real Suite. 275. Cocoa Raton FL 32922	B.	Business development	CHE	N.		750.00
5							
10/25/14	Patricia L. Quaybes 4106 Oxbow Dr. Cocomet Creek, FL 33073	I	president c/a. business.	CHE	N.		100.00
6							
1							
1							

CITY CLERK
CITY OF SUNRISE
16 NOV - 4 AM 11:45

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

NOV -4 AM 11:45

(1) Name Yamron vni Assiden

(2) I.D. Number _____

(3) Cover Period 10/22/14 through 11/3/14

(4) Page 1 of 3

(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
10/25/14 1	US Postal Service - Sunrise 3225 N Hiatus Rd Ft Lauderdale FL 33345	Mailing services.	MON		12.45
10/22/14 2	Office Depot 12550 W Sunrise Blvd Sunrise FL 33323	campaign supplies	MON		77.16.
11/3/14 3	Speedy Print 5270 N State Rd 7. Ft Lauderdale FL 33319	printing	MON		636.00
10/01/14 4	Lesters Diner III 1393 NW 136th Ave. Sunrise FL 33323	food for campaign workers.	MON.		35.17
10/29/14 5	Sams Club Sunrise FL 33323 951 246 7001	campaign supplies	MON		27.06
10/29/14 6	SCOTTOS PIZZA 3455 N Hiatus Rd. Sunrise FL 33351	food supplies for volunteers	MON		28.46.
10/27/14 7	Publix 10155 west oakland Ave. Sunrise FL 33571	food supplies for campaign workers.	MON		4.06
10/29/14 8	Publix 12500 W Sunrise Blvd. Sunrise FL 33323	food supplies for campaign volunteers.	MON.		18.09.

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yamtoy Vivv Addison

(2) LD. Number _____

(3) Cover Period 10/22/16 through 11/3/16

(4) Page 2 of 3.

(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
10/25/16	Publix 10155 W Oakland Park Blvd Sunrise FL 33351	Food supplies for campaign volunteers.	MON		27.60
9					
11/01/16	Publix 10155 W. Oakland Park Blvd Sunrise FL 33351	Food supplies for campaign workers.	MON		24.64.
10					
10/26/16	webflow.com	campaign website	MON		20.00.
11					
10/31/16	Speedy Print 5270 N State Rd 7. Ft Lauderdale FL 33319	campaign printing	MON.		318.00
12					
10/23/16	Sybill Peart-Lyon	campaign staff	MON		430.00
13					
11/1/16	Kenneth Ivory.	campaign staff	MON		160.00
14					
11/2/16	Maurice wetby.	campaign staff	MON		100.00
15					
11/1/16	Kenneth Ivory	campaign staff	MON	4-NOV 16	0.00
16					

CITY OF SUNRISE
CITY CLERK

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yammyr Vivian Assidon

(2) I.D. Number _____

(3) Cover Period 10/22/16 through 11/3/16

(4) Page 3 of 3

(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
10/2/16 17	Raymond Thurston	campaign staff	MON		160.00
10/28/16 18	Raymond Thurston.	campaign staff	MON		160.00
11/3/16 19	Kenneth Iury	campaign staff	MON		160.00.
10/29/16 20.	ATM service charge	service charge.	MON		1.50
10/30/16 21	chevron ft lauderdale FL.	gas to campaign.	MON.		20.00
10/2/16 22.	Speedy print. 5270 N state Rd 7 Ft lauderdale 33319	campaign printing	MON		263.94.
10/23/16 23	Good Guys Signs. 1032 E Hillborough Ave. Tampa, FL 33604.	campaign signs/ printing	MON.		134.52.
11					

16 NOV -4 AM 11:45
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YAMOR Viji Assidon
Name

(2) 824 NW 130th Terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

16 DEC 27 AM 10:28
OFFICE USE ONLY

16 DEC 27 AM 10:28

CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A.
- 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 10/22/16 To 11/3/16 Report Type: GT.

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 2,890.00

Loans \$ 0.00

Total Monetary \$ 28,890.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 2,978.65

Transfers to Office Account \$ 0.00

Total Monetary \$ 2,978.65

(8) Other Distributions
\$ _____

(9) TOTAL Monetary Contributions To Date
\$ 44,491.02

(10) TOTAL Monetary Expenditures To Date
\$ 21,984.03

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yamor Viji Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yumto V. J. Addison (2) LD. Number _____
 (3) Cover Period 10/22/14 through 11/3/14 (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
11/3/14 24.	Williams, Chadrick	campaign staff	mon	ADD.	80.00
///					
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///					
///					
///					
///					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yantov Vivi Assidon
 Name

(2) 824 NW 136th Terrace
 Address (number and street)

Sunrise FL 33325
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
 CITY OF SUNRISE
 16 OCT 27 AM 9:17

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A
- 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 10/8/16 To 10/21/16 Report Type: GC

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 300.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 300.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, 10, 271.69

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, 10, 271.69

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 41, 601.82

(10) TOTAL Monetary Expenditures To Date

\$ _____, 18, 650.91

(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) Yael Assidon

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

(Type name) Yantov Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YIMTON VIV. ASSIDON (2) I.D. Number _____
 (3) Cover Period 10/8/16 through 10/21/16. (4) Page _____ 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
10/10/16	FedEx office 3396 N University Dr. Sunrise, FL 33357.	copying printing	MUN		8.59.
1					
10/14/16	Home Depot 12525 W Sunrise Blvd Sunrise FL 33323	campaign supplies	MUN		38.22
2					
10/17/16	Office Depot 12550 W Sunrise Blvd. Sunrise, FL 33323	campaign supplies	MUN.		7.94.
3					
10/17/16	Home Depot 2901 N University Dr. Sunrise FL 33322	campaign supplies	MUN		30.81
4					
10/20/16	Landslide Victory Campaigns 934 N University Dr. #135 Coral Springs, FL 33071	campaign literature/ flyers.	MUN		9544.00
5					
10/20/16	National Campaign Resource 934 N University Ave #135 Coral Springs FL 33071.	campaign	MUN		343.13
6					
10/10/16	Call Fire Inc. 877.897.FIRE	campaign phone calls	MUN		299.00
7					
/ /					

16 OCT 27 AM 9:17
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yumtov Mj. Assidon

(2) I.D. Number _____

(3) Cover Period 10/8/16 through 10/21/16 (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
10/13/16	Republic Services of Florida LP 8619 western way Jacksonville FL 32216	B.	Public Disposal services	CHE	N.		300.00

CITY CLERK
 CITY OF SUNRISE
 16 OCT 27 AM 9:17

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE

16 DEC 27 AM 10:28

(1) Yamton Vivi Assidan
Name

(2) 824 NW 130th Terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

Candidate Office Sought: Sunrise City Commissioner Group A.

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 10 / 8 / 14 To 10 / 21 / 14. Report Type: 66

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, 300.00

Loans \$ _____, 0.00

Total Monetary \$ _____, 300.00

In-Kind \$ _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, 10,626.14

Transfers to Office Account \$ _____, 0.00

Total Monetary \$ _____, 10,626.14

(8) Other Distributions
\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date
\$ _____, 41,601.82

(10) TOTAL Monetary Expenditures To Date
\$ _____, 19,005.38

(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) Yael Assidan

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

X [Signature]
Signature

(Type name) Yamton Vivi Assidan

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yumtan Vivian Assidon

(2) LD. Number _____

(3) Cover Period 10/8/14 through 10/31/14

(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					
10/13/14	Good Eyes Signs 6032 E Hillsborough Ave. Tampa FL 33604	Campaign Signs.	MON	ADD	254.47.
8					
10/14/14	Broward County Council of Professional Firefighters 72 NW 45th Ave. Deerfield Beach FL 33442	Campaign Sponsor	MON	ADD.	100.00.
9					
///					
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FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
 CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 OF SUNRISE

OFFICE 9:20 PM 1:20

(1) YOM TOV VIVI ASSIDON
 Name
 (2) 824 NW 130 TERRACE
 Address (number and street)
SUNRISE FL 33325
 City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): SUNRISE COMMISSION GROUP A
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
- Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
- Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 9/1/16 To 10/7/16 Report Type 64

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,425.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 2,313.82

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 41,301.82

(10) TOTAL Monetary Expenditures To Date

\$ 8,379.22

(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) YOM TOV VIVI ASSIDON

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X
 Signature

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

(Type name) YOM TOV VIVI ASSIDON

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X
 Signature

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yvonne Vivian Addison

(2) I.D. Number 16 OCT 13 PM 1:20

(3) Cover Period 9, 1, 14 through 10, 7, 14

(4) Page 1 of 2

(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
9/9/14	SAMS CLUB 1355 W Sunrise Blvd.	campaign supplies	mon		17.09
1	Sunrise FL 33323				
9/9/14	Home Depot 12525 W Sunrise Blvd.	campaign supplies	mon		140.58
2	Sunrise FL 33323				
9/9/14	Home Depot 12525 W Sunrise Blvd.	campaign supplies	mon		8.98
3	Sunrise FL 33323				
9/8/14	Good Guys Signs 1032 E. Hillsborough Ave	campaign signs	mon		835.15
4	Tampa FL 33604				
9/14/14	FedEx 13715 W Sunrise Blvd	printing	mon		36.95
5	Sunrise FL 33323				
9/19/14	Office Depot 12550 W Sunrise Blvd	printing, copying supplies	mon.		74.19.
6	Sunrise FL 33323				
9/24/14	Office Depot 12550 W Sunrise Blvd	campaign supplies	mon.		65.71
7	Sunrise FL 33323				
9/25/14	Home Depot 12525 W Sunrise Blvd.	campaign supplies	mon.		21.57
8	Sunrise FL 33323				

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yvonne Vivi Assidon (2) I.D. Number _____

(3) Cover Period 9/1/14 through 10/7/14 (4) Page 2 of 2

(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
9/27/16	Home Depot 2901 N University Drive Sunrise FL 33322	campaign supplies	MON		10.50
9					
9/28/16	ARTWORKS printing 5922 Lee St. Hollywood FL 33021	printing	MON		132.50
10					
9/27/16	www.webflow.com california 415-9440555	campaign website	MON		20.00
11					
10/3/16	SPEEDY PRINT 5270 N STATE ROAD 7 FORT Lauderdale, FL 33319	PRINTING DOOR HANGER	MON		550 ⁰⁰
12					
10/6/16	SPEEDY PRINT 5270 N STATE ROAD 7 FORT Lauderdale, FL 33319	PRINTING DOOR HANGER	MON		400 ⁰⁰
13					
11					
11					
11					

CITY CLERK
CITY OF SUNRISE
16 OCT 13 PM 1:20

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YOMY TOV VIVI ASSINON (2) I.D. Number _____

(3) Cover Period 9/1/16 through 10/7/16 (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
1/1	MITCHELL CEPASAK 8181 W BROWARD BLVD STE 201 PLANTATION FL 33324	I			CHE	N	100 ⁰⁰
1							
9, 26, 16	VISION MEDIA INC. 4544 N HIATUS ROAD SUNRISE FL 33351	B	OWNER		CHE	N	250 ⁰⁰
2							
9, 29, 16	THADDEUS HAMILTON 9352 N W 46TH CT SUNRISE FL 33351	I	Retired.		CHE	N	75 ⁰⁰
3							
9, 29, 16	BIG PICS MUSCLE CARS REPAIRS & RESTORATION. LLC 5359 N W 106 HILL ROAD SUNRISE FL 33351	B	OWNER MUSICIAN		CHE	N	500 ⁰⁰
4							
9, 29, 16	TRANS WORLD REALTY SERVICES INC. 5359 N W 106 HILL SUNRISE FL 33351	B	OWNER BWSIDES.		CHE	N	500 ⁰⁰
5							
1/1							
1/1							

[Signature]
10/14/16

CITY CLERK
CITY OF SUNRISE
16 OCT 13 PM 1:20

CITY CLERK
CITY OF SUNRISE
16 SEP - 7 AM 10:21

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOMTOV VIVI ASSIDON

Name

(2) 824 NW 130 TERRACE

Address (number and street)

SUNRISE FL 33325

City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SUNRISE COMMISSION GROUP A

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 8/1/16 To 8/31/16 Report Type: 78

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,500.00

Loans \$ 00.00

Total Monetary \$ _____

In-Kind \$ 00.00

(7) Expenditures This Report

Monetary Expenditures \$ 180.00

Transfers to Office Account \$ _____

Total Monetary \$ 180.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 39,876.82

(10) TOTAL Monetary Expenditures To Date

\$ 6,065.40

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yomtov Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YANTON Via Assidon (2) I.D. Number _____

(3) Cover Period 8 / 1 / 16 through 8 / 31 / 16. (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
8 / 3 / 16 1	Fraternal of Police Sunrise Lodge 80 PO Box 450086 Sunrise FL 33345	B	Member 6/1/16	CHE	N		500.00
8 / 8 / 16 2	Goldfinger 3801 N. University Drive Suite 101 Sunrise FL 33351	B	CLUB	CHE	N		250.00
8 / 15 / 16 3	Broward Collisional 3685 W Oakland Park Blvd Lauderdale Lakes, FL 33311	B	Auto REPAIR	CHE	N		250.00
8 / 15 / 16 4	westway towing Inc 3681 west Oakland Pk Blvd. Lauderdale Lakes, FL 33311	B	Towing	CHE	N		250.00
8 / 29 / 16 5	PBA. 2650 W. State Rd 84 Ft Lauderdale, FL 33312.	B.	Police Beneficent Association	CHE	N.		250.00

ASW
10/4/16

CITY CLERK
CITY OF SUNRISE
16 SEP -7 AM 10:22

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YIMMUN VIN ASSIDUN (2) I.D. Number _____

(3) Cover Period 8/1/14 through 8/31/14 (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					
8/15/14	WEST BROWARD DEMOCRATIC CLUB 13150 NW 11th St Sunrise FL 33321	Campaign advertisement	MAN		160.00
1					
8/27/14	webflaw.com california 415-9440555	Campaign website	MAN		20.00
2					
///					
///					
///					
///					
///					
///					
///					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YAMTOV VIVI ASSIDON
 Name
 (2) 824 NW 130 TERRACE
 Address (number and street)
SUNRISE FLA. 33320
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
16 AUG - 8 AM 9:42

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SUNRISE COMMISSION GROUP A

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 7/1/16 To 7/31/16 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ 200.00

Loans \$ _____ 00.00

Total Monetary \$ _____ 00.00

In-Kind \$ _____ 00.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ 144.23

Transfers to Office Account \$ _____

Total Monetary \$ _____ 144.23

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____ 38,376.82

(10) TOTAL Monetary Expenditures To Date

\$ _____ 5,885.40

(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) Yael Assidon

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

X [Signature]

Signature

(Type name) YamtoV VIVI Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yannov Mir Assidon

(2) I.D. Number _____

(3) Cover Period 7/1/16 through 7/31/16

(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
7/4/16	DOLLAR TREE STORE 13790 W. STATE RD 84 DAVIE FL 33325	campaign supplies	MON		11.66
1					
7/4/16	SAM'S CLUB 13550 W. Sunrise Blvd. Sunrise FL 33323	campaign supplies	MON		68.06
2					
7/22/16	OFFICE DEPOT 12550 W. SWIRISE BLVD SWIRISE FL 33323	office supplies for campaign	MON		44.51
3					
7/27/16	WEBFLOW.COM CA. HS 415-964-0555	campaign website	MON.		20.00
4					
1/1					
1/1					
1/1					
1/1					

CITY CLERK
CITY OF SUNRISE
16 AUG -8 AM 9:42

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamru Vivir Assidon (2) I.D. Number _____

(3) Cover Period 7/1/16 through 7/31/16 (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
7.26.16	ADAM TAL 11335 NW 18 CT PLANTATION FL 33323	I		CAS	N		50 ⁰⁰
1							
7.26.16	AUSTIN TAL 11335 NW 18 CT PLANTATION FL 33323	I		CAS	N		50 ⁰⁰
2							
7.26.16	ETHAN TAL 11335 NW 18 CT PLANTATION FL 33323	I		CAS	N		50 ⁰⁰
3							
7.26.16	ERLIZ TAL 11335 NW 18 CT PLANTATION FL 33323	I	Business owner.	CAS	N		50 ⁰⁰
4							
1							
1							
1							
1							

16 AUG -8 AM 9:42
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE

(1) YONTOU VIVI ASSIDON
Name

(2) 824 NW 130 TERRACE
Address (number and street)

SUNRISE FL 33325
City, State, Zip Code

OFFICE USE ONLY

16 JUL 11 AM 9:28

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 6/1/16 To 6/30/16 Report Type: 16

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 00 . 00

Loans \$, , 00 . 00

Total Monetary \$, , 00 . 00

In-Kind \$, , 00 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 3,048 . 31

Transfers to Office Account \$, 0 . 00 . 00

Total Monetary \$, 3,048 . 31

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 38 , 176 . 82

(10) TOTAL Monetary Expenditures To Date

\$, 5 , 741 . 17

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yonntou Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name VDM TOV VIVI ASSIMON (2) I.D. Number _____

(3) Cover Period 6/1/16 through 6/30/16 (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					
6/3/16	Speedy Print 1270 N. ST. Rd 7 Ft Lauderdale FL 33319	Printing	MON		143 ¹⁰
1					
6/23/16	City of Sunrise 10770 W OAKLAND PARK Blvd. Sunrise FL 33351	Qualifying fee for campaign	MON		2,870.04
2					
6/24/16	Godaddy.com	campaign website	MON		15.17
3					
6/27/16	WEBFLOW.com	campaign website	MON.		20.00
4					
/ /					
/ /					
/ /					
/ /					

CITY CLERK
 CITY OF SUNRISE
 16 JUL 11 AM 9:28

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISE
 16 JUN -7 PM 12:08

(1) YOM TOV VIVI ASSIDON
 Name

(2) 824 NW 130TH TERRACE
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A 2016
- 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 5/1/16 To 5/31/16 Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 50.00

Loans \$, 10,000.00

Total Monetary \$, 00.00.00

In-Kind \$, 00.00.00

(7) Expenditures This Report

Monetary Expenditures \$, , 190.00

Transfers to Office Account \$, ,

Total Monetary \$, , 190.00

(8) Other Distributions

\$

(9) TOTAL Monetary Contributions To Date

\$, 38,176.82

(10) TOTAL Monetary Expenditures To Date

\$, 2,692.86

(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) Yael Assidon

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

X [Signature]
 Signature

(Type name) YOM TOV VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name YOMTOV VIVI ASSIDON (2) I.D. Number _____

(3) Cover Period 5 1 1 16 through 1 1 31 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
5, 18, 16 1	THADDEUS HAMILTON 9352 NW 46 TH CT SUNRISE FL 33581	I	Retired	CHE			50 ⁰⁰
5, 26, 16 2	YOMTOV. ASSIDON 824 NW 130 TH TER SUNRISE FL 33525	S	Business Owner	LOA			1,000 ⁰⁰
1 1							
1 1							
1 1							
1 1							
1 1							

CITY CLERK
CITY OF SUNRISE
16 JUN - 7 PM 12:08

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM 2016 Viki ASSIDON (2) I.D. Number _____

(3) Cover Period 5/1/16 through 5/31/16 (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
5/12/16	GSDC 6800 SUNSET STRIP SUNRISE FL	SPONSOR	MON.		90 ⁰⁰
1					
5/18/16	WBDC PO BOX 450666 SUNRISE FL 33345	ADVERTISEMENT	MON		100 ⁰⁰
2					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

16 JUN -7 PM 12:08
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISE
 16 MAY -9 AM 10:24

(1) YOM TOV VIVI ASSIDON
 Name

(2) 824 NW 130th Terrace
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SUNRISE CITY COMMISSIONER GROUP A

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 4/1/16 To 4/30/16 Report Type: 44

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 740.82

Loans \$ 00.00

Total Monetary \$ 00.00

In-Kind \$ 00.00

(7) Expenditures This Report

Monetary Expenditures \$ 127.20

Transfers to Office Account \$ _____

Total Monetary \$ 127.20

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 6,116.28 ~~28,128.82~~

(10) TOTAL Monetary Expenditures To Date
 \$ 2,502.86

(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) Yael Assidon

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

X [Signature]
 Signature

(Type name) YOM TOV VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISE
 16 MAY -9 AM 10:24

(1) YOM TOV VIVI ASSIDON
 Name
 (2) 824 NW 130th Terrace
 Address (number and street)
SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: SUNRISE CITY COMMISSIONER GROUP A
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 4/1/16 To 4/30/16 Report Type: 14
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	_____	,	_____	.	<u>740.82</u>
Loans	\$	_____	,	_____	.	<u>00.00</u>
Total Monetary	\$	_____	,	_____	.	<u>00.00</u>
In-Kind	\$	_____	,	_____	.	<u>00.00</u>

(7) Expenditures This Report

Monetary Expenditures	\$	_____	,	_____	.	<u>127.20</u>
Transfers to Office Account	\$	_____	,	_____	.	_____
Total Monetary	\$	_____	,	_____	.	<u>127.20</u>

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ _____, 28,128.82

(10) TOTAL Monetary Expenditures To Date
 \$ _____, 2,502.86

(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) Yael Assidon
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
 X [Signature]
 Signature

(Type name) YOM TOV VIVI ASSIDON
 Candidate Chairperson (only for PC and PTY)
 X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name YOM TOV VIVI ASSIDOV (2) I.D. Number _____

(3) Cover Period 4/1/16 through 4/30/16 (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
4/5/16 1	NY TRUST BANK 9100 W OAKLAND PARK BLV SUNRISE FL 33351	B	BANK	RFE			15.82
4/7/16 2	GWDANT MANAGEMENT GROUP LLC 7001 SW 5TH ST PLANTATION FL 33317	B	Business	CHE			150.00
4/18/16 3	SAMUEL B COMPANY LLC 3301 NE 15TH AVE MIAMI FL 33137	B	Business	CHE			500.00
4/18/16 4	JOSEPH D'ALISI JEAN PALBERT 400 COMMODORE DR. NO 501 FORT LAUDERDALE 33325	I	Retired	CHE			50.00
4/18/16 5	JOSEFINA B HARVIN CIA DA 10701 NW 26 ST. SUNRISE FL 33322	I	Resident	CHE			2500
1/1							
1/1							

CITY CLERK
 CITY OF SUNRISE
 16 MAY -9 AM 10:24

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM TOV VIVI ASSIPON.

(2) I.D. Number _____

(3) Cover Period 4, 7, 16 through 4, 30, 16

(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
4/20/16	ARTWORKS PRINTING 5922 Lee Street. Hollywood FL 33021	Campaign T-SHIRT	MON		127.20
1					
///					
///					
///					
///					
///					
///					
///					
///					
///					

16 MAY - 9 AM 10:24
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOV VIVI ASSIHOVA
 Name
 (2) 824 NW 130th Terrace
 Address (number and street)
SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

16 JUN - 7 PM 12:15

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE CITY COMMISSION GROUP
- 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 3 1 1 16 To 3 3 1 16 Report Type: M 3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 14,636.00

Loans \$ 9,500.00

Total Monetary \$ 00.00

In-Kind \$ 00.00

(7) Expenditures This Report

Monetary Expenditures \$ 1,212.90

Transfers to Office Account \$ _____

Total Monetary \$ 1,212.90

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 27,386.00

(10) TOTAL Monetary Expenditures To Date

\$ 2,375.66

(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) YOM TOV VIVI ASSIHOVA
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X ASSIHOVA
 Signature

(Type name) YOM TOV VIVI ASSIHOVA
 Candidate Chairperson (only for PC and PTY)

X ASSIHOVA
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yoneta Vivi Assidon
Name

(2) 824 NW 130th Terrace
Address (number and street)

Surprise FL 33325
City, State, Zip Code

OFFICE USE ONLY

16 APR - 7 PM 2:10
CITY OF SUNRISE
CITY CLERK

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Surprise City Commissioner Group A 2016
- 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 3 / 1 / 16 To 3 / 31 / 16 Report Type: M3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 14 , 436 . 00

Loans \$, 00 , 00 . 00

Total Monetary \$, 00 , 00 . 00

In-Kind \$, 00 , 00 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 1 , 212 . 90

Transfers to Office Account \$, , .

Total Monetary \$, 1 , 212 . 90

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 27 , 386 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 2 , 375 . 66

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yoneta Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name YANTOV VIVI ASSIDON (2) I.D. Number _____

(3) Cover Period 03/01/16 through 03/31/16 (4) Page 5 of 5.

(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
3122116 29	Suskind, Diana 20 Main Street Flur 5 Apt 0 Leominster MA 01458	I	Professor	CHE			100.00
317116 30	Bartov, Eli 2100 N Ocean Blvd Apt 1001 Ft Lauderdale FL 33304	I	Retired	CHE			180.00
318116 31	Americana Out LLC 2720 W. Atlantic Blvd. Pompano Beach FL 33069	B	Business	CHE			250.00
318116 32	Ed Morse Seagrass Automall 14401 W. Sunrise Blvd Sunrise FL 33323	B	Automall	CHE			1000.00
318116 33	Suskind, Dana 5730 S Lake Wood Ave Chicago IL 60637	I	Physician	CHE			200.00
3128116 34	Assidon, Yantov. Vivi 844 NW 130th Terrace Sunrise FL 33325	S	Business owner	LDA			9,500.00
1 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YANTON W. HISSIDON

(2) I.D. Number _____

(3) Cover Period 03/01/16 through 03/31/16

(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
3/23/16 1	Artworks Printing Enterprises 5299 Lec St Hollywood FL 33021	Campaign T-Shirts	MON		\$583.00
3/14/16 2	Dunkin Donuts 11170 W. Oakland Park Blvd Sunrise FL 3	Food. FOR VOLUNTEERS	MON		13.48
3/15/16 3	Speedy Print 5270 N Stater Rd 7 Pt Lauderdale FL 33319	stickers? cards	MON		344.50
3/2/16 4	Gleept TV c/o lauder vfs Digital Inc. 3474 NE 12th terrace Oakland Park FL 33334	Digital services	MON		258.00
3/7/16 5	Paypal 2211 N. FIRST STREET SAN JOSE CA 95131	Bank transfer fee	MON		6.10
3/9/16 6	CHK ORDER BOOK	BANK FEE	MON		15.82
1/1					
1/1					

16 APR - 7 PM 2:10
CITY OF SUNRISE
CITY CLERK

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamtor ~~W~~ Assidan (2) I.D. Number _____

(3) Cover Period 03/01/16 through 03/31/16 (4) Page 1 of 5

(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
2/28/16 1	Schultz, Eric 1520 O St. NW Apt 106 WASHINGTON DC 20005	I	Press	CHE			100.00
2/28/16 2	Shankman, Diane E 13424 NW 8th St. Sunrise FL 33325	F	RETIR	CHE			25.00
2/28/16 3	Sofield, Lawrence 6601 NW 27th St Sunrise FL 33313	I	BUSINESS	CHE			100.00
2/28/16 4	Effman, Steven W 1250 S. Pine Island Rd Suite 450 Plantation FL 33324	B	Attorney.	CHE			250.00
2/28/16 5	Olivo, Dominic S. 934 NW 133 Ave Sunrise FL 33325	I	RETIR	CHE			25.00
2/27/16 6	Fever, Louis C. 2955 NW 124 Ave Apt. 307 Sunrise FL 33323	I	BUSINESS	CHE			100.00
2/24/16 7	Soufrine, Sheila 2541 NW 111 Rd Apt 104 Sunrise FL 33322	F	RETIR	CHE			36.00

11:2 AM 1-APR-16

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamta Uvi Assidon (2) I.D. Number _____

(3) Cover Period 03/01/16 through 03/31/16. (4) Page 2 of 5

(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				
2/28/16	Cagan, Frank 1852 NW 168th Ave Pembroke Pines FL 33028	I	FIRE FIGHTER	CHE			100.00
8							
2/28/16	Deferrari, Jacqueline 1115 NW 133rd Ave. B. Sunrise FL 33323	I	RESIDENT	CHE			150.00
9							
2/28/16	Hones, Jamal C 400 Oakstone Pompano Beach, FL 33069	I	BUSINESS	CHE			25.00
10							
2/28/16	Jimenez, Jose Franca 4730 NW 113th Ave. Sunrise FL 33323	I	RESIDENT	CHE			100.00
11							
2/26/16	Malk, Michele 3340 NW 97th way Sunrise, FL 33351	F	RESIDENT	CHE			100.00
12							
2/16/16	Gardner, Elayne 1707 SW 110th Ter Davie FL 33324	F	RESIDENT	CHE			25.00
13							
2/28/16	Schulte, Jack 48 Ely Dr. Fayetteville, NY 13060	F	RETIRE	CHE			350.00
14							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamtor Vivi Assidan (2) I.D. Number _____

(3) Cover Period 03/07/14 through 03/31/14 (4) Page 3 of 3

(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		
2/28/14 15	Laystrom, William C Jr. 1177 SE 3rd Ave Lauderdale, FL 33316	I	Attorney	CHE			250.00
2/28/14 16	Reinstern, Lais 220 NW 101st Ave Plantation FL 33324	I	ATTORNEY	CHE			50.00
2/28/14 17	Kerch, Neill C. 8570 NW 31st Ct Sunrise, FL 33351	I	Attorney	CHE			50.00
2/28/14 18	Smith, E. A 2602 NW 103rd Ave Apt 2004 Sunrise FL 33322	I	Retiree	CHE			25.00
2/28/14 19	Filla, Sandra 10211 NW 24th St Sunrise FL 33322	I	Resident	CHE			25.00
2/28/14 20	Guets, David 1364 NW 126th Ave Sunrise FL 33323	I	resident	CHE			50.00
2/29/14 21	Besso, Michel 16015 Sawgrass CORPORATE PARKWAY Suite	I	Business	CHE			500.00

16 APR -7 PM 2:11
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Yumkw Uji Assidm (2) I.D. Number _____

(3) Cover Period 03 / 01 / 16 through 03 / 31 / 16 (4) Page 4 of 5

(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
2 / 28 / 16 22	Schulte, SBth J. 1213 Blackthorn Rd Louisville, KY 40299	I	Physician	CHE			200.00
3 / 3 / 16 23	Storms, Jane I 10301 NW 20th Ct Sunrise FL 33322	I	Resident	CHE			100.00
2 / 15 / 16 24	Nob Hill Place LLC 6827 W. Commercial Blvd Tamarac FL 33319	B	Banking	CHE			500.00
2 / 28 / 16 25	Rajput, Nuzhat 7865 NW 11th St Plantation FL 33322	F	Resident	CAS			50.00
2 / 28 / 16 26	Cagan, Frank 1252 NW 168th Ave Pembroke Pine FL 33088	I	Firefighter	CAS			20.00
2 / 28 / 16 27	Soufrine, Harvey 2541 Nob Hill Rd APT 106 Sunrise FL 33322	I	Retiree	CAS			50.00
3 / 22 / 16 28	Nelson John Robert 4420 Sunrise Lakes Blvd APT 310 Sunrise FL 33322	I	resident	CHE			50.00

16 APR - 7 PM 2:11
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yamtov Vivi Assidan
Name

(2) 824 NW 130th terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
16 MAR -8 PM 12:02

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2014
- 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 2 / 1 / 14 To 2 / 29 / 16 Report Type: M2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 00 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 00 . 00

In-Kind \$, , 00 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 730 . 46

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 730 . 46

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 12 , 750 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 1 , 162 . 76

(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) Yael Assidan

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

X
Signature

(Type name) Yamtov Vivi Assidan

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yannov Vivi Assidan

(2) I.D. Number _____

(3) Cover Period 2 / 1 / 16 through 2 / 29 / 16

(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
2/28/16 1	Scouto's Pizza 3455 N. Hialeah Rd. Sunrise, FL 33351	Campaign kickoff.	MON		711.21
2/28/16 2	Party City 175040 W Sunrise Blvd. Sunrise FL 33323 Bay 218	Balloons.	MON		19.25
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CITY CLERK
 CITY OF SUNRISE
 16 MAR - 8 PM 2:02

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOV VIVI ASSIDON
Name
(2) 824 NW 130TH TERRACE
Address (number and street)
SUNRISE FL 33325
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE CITY COMMISSNER GROUP
 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 1 / 1 / 16 To 1 / 31 / 16 Report Type: M1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,050.00
Loans \$ 00.00
Total Monetary \$ 00.00
In-Kind \$ 00.00

(7) Expenditures This Report

Monetary Expenditures \$ 36.03
Transfers to Office Account \$ 00.00
Total Monetary \$ 36.03

(9) TOTAL Monetary Contributions To Date

\$ 12,750.00

(10) TOTAL Monetary Expenditures To Date

\$ 432.30

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

X [Signature]
Signature

(Type name) YOM TOV VIVI ASSIDON
 Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YOM TOV VIVI ASSIDON (2) I.D. Number _____

(3) Cover Period 1 / 1 / 16 through 1 / 31 / 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
1, 27, 16	DANAY MISKEC w/ BACKMAN LLP 145 E 4TH STREET B BOCA RATON FL 33432	B	LLP GROUP	C CHE	N	N/A	1,000
1							
1, 27, 16	Jane Frelich 398 MAZZARDO LAKE WILSON FL. 33327	I	Realtor	CHE			50 ⁰⁰
2							
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1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name VOM TOV VIVI ASSISION

(2) I.D. Number _____

(3) Cover Period 1 / 1 / 16 through 1 / 31 / 16

(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
1/27/16 1	OFFICE DEPOT 3280 12550 W SWNRRISE BLV SW NRRISE Fla. 33328		MON		36.03
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/ /			Office of the City Clerk City of Sunrise 10770 West Oakland Park Blvd. Sunrise, Florida 33351-6899		

CAMPAIGN TREASURER'S REPORT SUMMARY

16 JAN -5 AM 11:03

CITY CLERK
CITY OF SUNRISE

OFFICE USE ONLY

(1) YOM TOV VIVI ASSIDON
Name

(2) 824 NW 130TH TERRACE
Address (number and street)

SUNRISE FL 33325
City, State, Zip Code

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

Candidate Office Sought: SUNRISE CITY COMMISSNER GROUP A 2016

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 12/1/15 To 12/31/15 Report Type: M12

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,000.00

Loans \$ 00.00

Total Monetary \$ 00.00

In-Kind \$ 00.00

(7) Expenditures This Report

Monetary Expenditures \$ 180.00

Transfers to Office Account \$ 00.00

Total Monetary \$ 00.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 11,700.00

(10) TOTAL Monetary Expenditures To Date

\$ 396.27

(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) Yael Assidon

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

X _____
Signature

(Type name) Yomtov Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X ASSIDON
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name YOMTOU VIVI ASSIDON (2) I.D. Number _____

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

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
12/01/15	Equity Land Title INC 250 S. Australian Ave STE 702 West Palm Bch, FL 33411	B	Title company.	CHE	N	N/A	\$500.00
1							
12/1/15	Greenspoon, Marder 100 W. Cypress Creek Rd. SUITE 700 FORT LAUDERDALE, FL 33309	B	Law group.	CHE	N	N/A	\$500.00
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CITY CLERK
 CITY OF SUNRISE
 16 JAN - 5 AM 11:03

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yamtao Vivi Assidon (2) I.D. Number _____

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

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
12/2/15	SPEEDY PRINTING 5270 N State Rd 7 Ft Lauderdale, FL 33319		MAN		\$180.00
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CITY CLERK
 CITY OF SUNRISE
 16 JAN -5 AM 11:03

**CITY CLERK
CITY OF SUNRISE
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY
15 DEC -7 AM 11:50

CITY CLERK
CITY OF SUNRISE
15 DEC -7 AM 11:50

(1) YOMTOV VIVI ASSIDON
Name
(2) 820 NW 130TH TERRACE
Address (number and street)
SUNRISE FL 33325
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE CITY COMMISSNER GROUP A 2016
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 11 / 1 / 15 To 11 / 30 / 15 Report Type: M 11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 00 . 00

Loans \$ _____, _____, 00 . 00

Total Monetary \$ _____, _____, 00 . 00

In-Kind \$ _____, _____, 00 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 00 . 00

Transfers to Office Account \$ _____, _____, 00 . 00

Total Monetary \$ _____, _____, 00 . 00

(8) Other Distributions

\$ _____, _____, _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 10 , 700 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 216 . 27

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

X [Signature]
Signature

(Type name) YOMTOV VIVI ASSIDON
 Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yomtov Vivi Assidon
 Name
 (2) 824 NW 130th Terrace
 Address (number and street)
Sunrise FL 33325
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
15 NOV - 3 AM 10:40

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2016
- 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 10 / 1 / 15 To 10 / 31 / 15 Report Type: MID

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 00 . 00

Loans \$, 5 , 000 . 00

Total Monetary \$, 0 , 00 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 00 . 00

Transfers to Office Account \$, , 00 . 00

Total Monetary \$, , 00 . 00

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 10 , 700 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 216 . 27

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

X [Signature]
 Signature

(Type name) Yomtov Vivi Assidon
 Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

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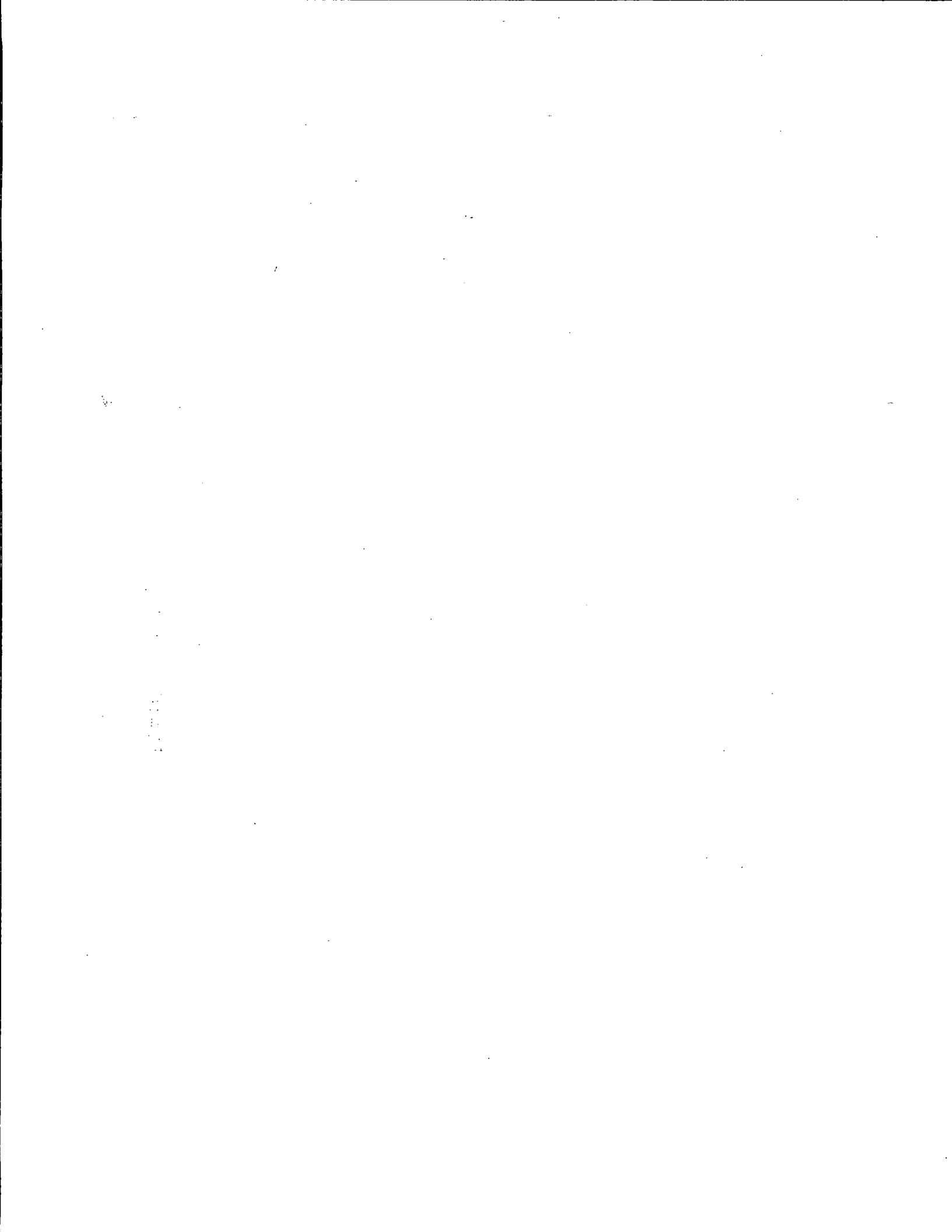
CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamtao Vivvi Assidon (2) I.D. Number _____

(3) Cover Period 10 / 1 / 15 through 10 / 31 / 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
10 / 6 / 15	Assidon, Yamtao 824 NW 130th St. Sunrise FL 33325	S	self employed	LOA			5,000.00
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CITY CLERK
CITY OF SUNRISE
15 NOV - 3 AM '15



CAMPAIGN TREASURER'S REPORT SUMMARY

15 OCT -7 AM 10:54
 CLERK
 CITY OF SUNRISE

(1) YOM TOV VIVI ASSIDON
 Name

(2) 824 NW 130th TARECE
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SUNRISE COMMISSION GROUP A

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

2016

(5) Report Identifiers

Cover Period: From 9/1/15 To 9/30/15 Report Type: M9

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 00.00

Loans \$, , 00.00

Total Monetary \$, , 00.00

In-Kind \$, , 00.00

(7) Expenditures This Report

Monetary Expenditures \$, , 00.00

Transfers to Office Account \$, , 00.00

Total Monetary \$, , 00.00

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 5 , 700.00

(10) TOTAL Monetary Expenditures To Date

\$, , 216.27

(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) Yael Assidon

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

(Type name) YOM TOV VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOH TOU VIVI ASSIDON
Name

(2) 824 NW 130 TARECE - N
Address (number and street)

SUNRISE FLA 33325
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

15 SEP 18 AM 10:25 A

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP
- 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 8 / 1 / 15 To 8 / 31 / 15 Report Type: 17

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, 1,000.00

Loans \$ _____, 00.00

Total Monetary \$ _____, 00.00

In-Kind \$ _____, 00.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 00.00

Transfers to Office Account \$ _____, _____, 00.00

Total Monetary \$ _____, _____, 00.00

(8) Other Distributions

\$ _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 5,700.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 216.27

(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) YOH TOU VIVI ASSIDON

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

X
Signature

(Type name) YOH TOU VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) Yamtuw Nwi Assidon
Name

(2) 24 NW 13th Terrace
Address (number and street)

Sunrise FL 33305
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

15 SEP - 9 AM 10:55
 CITY OF SUNRISE
 CLERK

(4) Check appropriate box(es):

Candidate Office Sought: Sunrise City Commissioner Group A 2008

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 08/01/15 To 08/31/15 Report Type: MR

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,000.00

Loans \$ 0.00

Total Monetary \$ 1,000.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 5,500.00

(10) TOTAL Monetary Expenditures To Date

\$ 96.87

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yamtuw Nwi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yantow Vivir Ksidon (2) I.D. Number _____

(3) Cover Period 8/1/15 through 8/31/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount	
(6) Sequence Number	Street Address & City, State, Zip Code							
8/20/15	Lewinter-Suskind USire 20630 Barton Rd Apt Redlands, Ct 92373-4330 2313	I	Editor	CHE	N		1000.00	
1								
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CITY CLERK
 CITY OF SUNRISE
 15 SEP -9 AM 10:55

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOU VIVI ASSIDON
 Name
 (2) 324 NW 130 TRAIL
 Address (number and street)
SWRISE Fla. 33325
 City, State, Zip Code

OFFICE USE ONLY

15 SEP 18 AM 10:25

CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SWRISE COMMISSIONERS GROUP A
- 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 7/1/15 To 7/31/15 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,220.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 76.27

Transfers to Office Account \$ 0.01

Total Monetary \$ 76.27

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date

\$ 4,700.00

(10) TOTAL Monetary Expenditures To Date

\$ 216.27

(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) YOM TOU VIVI ASSIDON
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X ASSIDON
 Signature

(Type name) YOM TOU VIVI ASSIDON
 Candidate Chairperson (only for PC and PTY)

X ASSIDON
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YON TOU VIVI ASSIDON
 Name
 (2) 824 NW 130TH TERACE
 Address (number and street)
SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
15 SEP -9 AM 10:56

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

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

(5) Report Identifiers

Cover Period: From 7/1/15 To 7/31/15 Report Type: 77

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,220.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 76.87

Transfers to Office Account \$ 0.00

Total Monetary \$ 76.87

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 4,580.00

(10) TOTAL Monetary Expenditures To Date

\$ 96.87

(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) YON TOU VIVI ASSIDON
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X
 Signature

(Type name) YON TOU VIVI ASSIDON
 Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YONTOU VIVI ASSIDOS (2) I.D. Number _____

(3) Cover Period 7/1/15 through 7/31/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
1 / 1	AMTRAST BANK 9100 W ORLAND PAUL SUNRISE FL 33350	B	BANK	RETRN		APP1	20.00
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
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1 / 1							
1 / 1							
1 / 1							

CITY CLERK
 CITY OF SUNRISE
 15 SEP -9 AM 10:56

CORRECT

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yamton Vivi Assidan
Name

(2) 824 NW 130th Terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

15 AUG 10 AM 9:22

CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2010
- 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 7/1/15 To 7/31/15 Report Type: MF

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,200.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 76.87

Transfers to Office Account \$ 6.00

Total Monetary \$ 76.87

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 4,550.00

(10) TOTAL Monetary Expenditures To Date
\$ 76.87

(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) Yael Assidan

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

(Type name) Yamton Vivi Assidan

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yantov Uvi Assidan
Name

(2) 824 NW 130th Terrace
Address (number and street)

Sunrise FL 33305
City, State, Zip Code

OFFICE USE ONLY

15 AUG -7 AM 11:34

CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2016
- 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 7/1/15 To 7/31/15 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,200.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 76.27

Transfers to Office Account \$ 0.00

Total Monetary \$ 76.27

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 4,550.00

(10) TOTAL Monetary Expenditures To Date

\$ 76.27

(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) Yael Assidan

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

X
Signature

(Type name) Yantov Uvi Assidan

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yantou Vivi Assidan (2) I.D. Number _____

(3) Cover Period 7/10/15 through 7/31/15 (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
7/13/15	Suskind, Dana 5730 S. Kenwood Ave Chicago, IL 60637	I	M.D.	CCE	N		100.00
1							
7/16/15	Suskind, Michael 2012 W Center St Chicago IL 60622	I	Advertising	CCE	N		100.00
2							
7/16/15	Lemmer-Suskind Leslie 24630 Burton Rd Apt 2313 Redlands CA 92373	I	Editor	CCE	N		1,000.00
3							
1							
1							
1							
1							

CITY CLERK
 CITY OF SUNRISE
 15 AUG - 7 AM 34

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yunker v. Assad (2) I.D. Number _____
 (3) Cover Period 7, 1, 15 through 7, 31, 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
7/8/15 1	GODADDY.COM 480-5058855AZ	Campaign website	MON		15.17
7/14/15 2	GODADDY.COM 480-5058855AZ	Campaign website	MON		61.70
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CITY CLERK
 CITY OF SUNRISE
 15 AUG - 7 AM 11 34

CAMPAIGN TREASURER'S REPORT SUMMARY

15 SEP 18 AM 10:25
 CITY CLERK
 CITY OF SUNRISE

(1) YOM TOV VIVI ASSIDON
 Name

(2) 824 NW 130th TERRACE
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 6 / 1 / 15 To 6 / 31 / 15 Report Type: M6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1,280 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 10 . 00

Transfers to Office Account \$, , 00 . 00

Total Monetary \$, , 00 . 00

(8) Other Distributions

\$, , 00 . 00

(9) TOTAL Monetary Contributions To Date

\$, 3,480 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 140 . 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) YOM TOV VIVI ASSIDON

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

(Type name) YOM TOV VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X ASSIDON
 Signature

X ASSIDON
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM TOU VIVI ASSOCIATION (2) I.D. Number _____
 (3) Cover Period 6/1/15 through 6/30/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
6/1/15	AMTRUST BANK 9100 W ORCHARD PARK SWNAISSE FL 3335	BANK	DIS 10/15 FFF	DEC	10°
6/1/15	AMTRUST BANK 9100 W ORCHARD PARK SWNAISSE FL 3335	BANK	CAN FFF AD 9/21/15	DEC	10°
6/19/15	AMTRUST BANK 9100 W ORCHARD PARK SWNAISSE FL 3335	BANK	CAN FFF AD 9/21/15	APP	10°
1/1					
1/1					
1/1					
1/1					
1/1					

15 SEP 18 AM 10:25
 CITY OF SUNRISE
 CLERK

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YONTOU VIVI ASSIDON
Name

(2) 824 NW 130th TERACE
Address (number and street)

SENAISE FLA 33325
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SENAISE GROUP A
- 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 6 / 1 / 15 To 6 / 30 / 15 Report Type: 16

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 250.00

Loans \$, , 0.00

Total Monetary \$, , 0.00

In-Kind \$, , 0.00

(7) Expenditures This Report

Monetary Expenditures \$, , 10.00

Transfers to Office Account \$, , 0.00

Total Monetary \$, , 0.00

(8) Other Distributions

\$, ,

(9) TOTAL Monetary Contributions To Date

\$, 3 , 250.00

(10) TOTAL Monetary Expenditures To Date

\$, , 20.00

(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) YONTOU VIVI ASSIDON

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

X ASSIDON
Signature

(Type name) YONTOU VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X ASSIDON
Signature

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
15 SEP - 9 AM 10:56

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM TV VIVI ASSIDON (2) I.D. Number _____
 (3) Cover Period 6/1/15 through 6/30/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
6/1/15	AMTRAS BANK 9100 W DELAND PARK SUNRISE FL 33351	BANK	FEE	APP1	\$10 ⁰⁰
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/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

CITY CLERK
 CITY OF SUNRISE
 15 SEP - 9 AM 10:56

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yannov Uivi Assidan
 Name
 (2) 824 NW 130th Terrace #
 Address (number and street)
Sunrise FL 33325
 City, State, Zip Code

OFFICE USE ONLY

15 JUL 14 AM 11:11

CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2014
- 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 6/1/15 To 6/31/15 Report Type: MOL

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,250.00

Loans \$ 0.00

Total Monetary \$ 1,250.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 10.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 10.00

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 1,250.00

(10) TOTAL Monetary Expenditures To Date
 \$ 10.00

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

X [Signature]
 Signature

(Type name) Yannov Uivi Assidan
 Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yoman Nui Assidon

(2) I.D. Number _____

(3) Cover Period 6 / 1 / 15 through 6 / 31 / 15

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
6/1/15 1	Amtrust Bank 910 W. Oakland Park Blvd Sunrise FL 33351	FEE	DIS	ADD 1	\$10.00
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

15 JUL 14 AM 12
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yamtao V. Vi Assidon
Name

(2) 804 NW 130th terrace
Address (number and street)
Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

15 JUL -7 PM 2:12

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2016
- 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 6 / 1 / 15 To 6 / 31 / 15 Report Type: M6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,250.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 3,350.00

(10) TOTAL Monetary Expenditures To Date

\$ 0.00

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yamtao V. Vi Assidon

Candidate Chairperson (only for PC and PTY)

X ASSIDON
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamter Vivi Assidon (2) I.D. Number _____
 (3) Cover Period 6/1/15 through 6/31/15 (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
6/1/15	Dobnar, Allison Layman, Voigt, Adair 1177SE 3rd Ave Fort Lauderdale FL 33316	B	Lawyer	CHE	N		250.00
1							
6/10/15	Bergerson, Ronald M 19612 SW 69th PL Fort Lauderdale, FL 33322	F	Business owner	CHE	N		500.00
2							
6/10/15	City of Sunrise FOP Lodge 80A ASSOC INC PO BOX 450581 Sunrise FL 33345	B	Fraternal Order of Police	CHE	N		500.00
3							
1/1							
1/1							
1/1							
1/1							

CITY CLERK
CITY OF SUNRISE
15 JUL - 7 PM 2: 2

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOV VIVI ASSIDOR
Name

(2) 824 NW 130 TARECE
Address (number and street)

SW RAISE FLA 33325
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

15 SEP 18 AM 10:25
CLERK
TY OF SUNRISE

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SW RAISE COMMISSION GROUP A
- 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 5 / 1 / 15 To 5 / 30 / 15 Report Type: MS

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 100 . 00

Loans \$ _____ , _____ , 00 . 00

Total Monetary \$ _____ , _____ , 00 . 00

In-Kind \$ _____ , _____ , 00 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

Transfers to Office Account \$ _____ , _____ , 00 . 00

Total Monetary \$ _____ , _____ , 00 . 00

(8) Other Distributions

\$ _____ , _____ , 00 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2,200 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 130 . 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) YOM TOV VIVI ASSIDOR

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

X ASSIDOR
Signature

(Type name) YOM TOV VIVI ASSIDOR

Candidate Chairperson (only for PC and PTY)

X ASSIDOR
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM TOU VIVI ASSOCIATION (2) I.D. Number _____
 (3) Cover Period 5/1/15 through 5/30/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
5/20/15	AMTRAVEL BANK 9106 W OKLAHOMA PKWY MUNICIPAL FC 33351	FEE	CAN	ADD	10.
1					
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15 SEP 18 AM 10:25
 CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE
15 JUN - 8 AM 15 50

(1) Yomton Vivi Assidon
Name

(2) 824 NW 130th Terrace
Address (number and street)

SUNNISE FL 33325
City, State, Zip Code

Check here if address has changed

15 JUN 8 AM 15 50
OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SUNNISE CITY COMMISSIONER Group A 2020

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

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

(5) Report Identifiers

Cover Period: From 05/01/15 To 05/30/15 Report Type: MS

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 100.00

Loans \$, , 0.00

Total Monetary \$, , 0.00

In-Kind \$, , 00.00

(7) Expenditures This Report

Monetary Expenditures \$, , 0.00

Transfers to Office Account \$, , 0.00

Total Monetary \$, , 0.00

(8) Other Distributions

\$, , 0.00

(9) TOTAL Monetary Contributions To Date

\$, 2.100.00

(10) TOTAL Monetary Expenditures To Date

\$, , 0.00

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yomton Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yamtor Vivi Assidon (2) I.D. Number _____

(3) Cover Period 5/1/15 through 5/30/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
5/1/15	Rich, Nan H. 2748 Pinehurst Weston, MA 03323	I	Senator	CHE	N		100.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOU VIVI ASSIDON
Name

(2) 824 NW 130th TARECE
Address (number and street)

SUNRISE Fla 33328
City, State, Zip Code

OFFICE USE ONLY

15 SEP 18 AM 10:25

COUNTY CLERK
COUNTY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 4 / 1 / 15 To 4 / 30 / 15 Report Type: 94

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 100 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 120 . 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) YOM TOU VIVI ASSIDON

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

X ASSIDON
Signature

(Type name) YOM TOU VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X ASSIDON
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YON TOV VIVI ASSIBOV

(2) I.D. Number _____

(3) Cover Period 4/1/15 through 4/30/15

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
4/30/15	AMTRAKST Bldg 2 9100 W ORCHARD PARK SUNRISE FL 33351	FEE	CAN	APP	10
1					
/ /					
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/ /					

15 SEP 18 AM 10:25
 CLERK
 CITY OF SUNRISE

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

15 MAY -7 PM 12:17

OFFICE USE ONLY

Yamhov Viji Assidan
Name

Sunrise City Commission Group A 2014
Office Sought

824 NW 130th Terrace
Address

Sunrise City FL State 33325 Zip Code

- Candidate
- Political Committee
- Electioneering Communications Organization
- Party Executive Committee

- Check here if address has changed since last report.
- Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

- MONTHLY REPORT
- PRIMARY ELECTION
- GENERAL ELECTION
- OTHER REPORT TYPE

Indicate report # Indicate report # Indicate report # Indicate report type and # as applicable:

M 4 P _____ G _____ _____

- TERMINATION REPORT
- SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

4/1/15 THROUGH 4/30/15

X [Signature] 5/6/15
Signature Date

X ASSIDON 5/6/15
Signature Date

- REQUIRED SIGNATURES FOR:**
- Candidates:**
Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
 - Political Committees:**
Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
 - Electioneering Communications Organizations:**
Treasurer (s. 106.0703(4)(c), F.S.)
 - Party Executive Committees:**
Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY OF SUNRISE
 15 SEP 18 AM 10:25

(1) YOMTUV VIVI ASSIDON
 Name

(2) 824 NW 130th STREET
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
 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 2 / 1 / 15 To 2 / 28 / 15 Report Type: 12

Original
 Amendment
 Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 40.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2, 040.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 100.00

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

X ASSIDON
 Signature

(Type name) YOMTUV VIVI ASSIDON
 Candidate
 Chairperson (only for PC and PTY)

X ASSIDON
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOHAN VIVI ASSISANT (2) I.D. Number _____
 (3) Cover Period 2/1/15 through 2/30/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
2/20/15	AMTRAK 13 Ave 9000 W ORLAND PARK SUNRISE, FL 33397	FEE	CAN	ADD	10
/ /					
/ /					
/ /					
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15 SEP 18 AM 10:25
 CLERK
 CITY OF SUNRISE

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

15 APR -7 AM 9:06

OFFICE USE ONLY

Yonita Viv Assidon
Name

Sunrise City Commissioner Group A 2016
Office Sought

824 NW 130th Terrace
Address

Sunrise FL 33328
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #
M 3

Indicate report #
P _____

Indicate report #
G _____

Indicate report type and #
as applicable:

TERMINATION REPORT SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

3/1/15 THROUGH 3/31/15

X [Signature]
Signature

4/7/15
Date

X [Signature]
Signature

4/7/15
Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE OF SUNRISE
 15 SEP 18 AM 10:25

(1) YOMTUV VIVI ASSIDON
 Name

(2) 824 NW 130th STREET
 Address (number and street)

SWANRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SWANRISE COMMISSION GROUP A
 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 2 / 1 / 15 To 2 / 28 / 15 Report Type: 12

Original
 Amendment
 Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 040 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 100 . 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) YOMTUV VIVI ASSIDON
 Individual (only for IE or electioneering comm.)
 Treasurer
 Deputy Treasurer

X
ASSIDON
 Signature

(Type name) YOMTUV VIVI ASSIDON
 Candidate
 Chairperson (only for PC and PTY)

X
ASSIDON
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOHAN VIVI ASSOCIATES (2) I.D. Number _____
 (3) Cover Period 2/1/15 through 2/30/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
2/20/15	AMTRAK 13 Ave 9000 W ORLAND PARK SUNRISE, FL 33397	FEE	CAN	ADD	10
/ /					
/ /					
/ /					
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/ /					
/ /					
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15 SEP 18 AM 10:25
 CLERK
 CITY OF SUNRISE

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

15 MAR -6 PM 1:27

OFFICE USE ONLY

Volunteer With Assistance
Name

Sunrise City Commissioner Group A 2014
Office Sought

824 NW 130th Terrace
Address

Sunrise FL 33325
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #
M 2

Indicate report #
P _____

Indicate report #
G _____

Indicate report type and #
as applicable:

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

2/2/15 THROUGH 2/28/15

X [Signature]
Signature

3/5/15
Date

X [Signature]
Signature

3/5/15
Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YON TOV VIVI ASSIDON
Name

(2) 324 NH 130th TARRACE
Address (number and street)

SUNRISE FLA 33325
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

15 SEP 18 AM 10:24
CLERK
TY OF SUNRISE

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 1 / 1 / 15 To 1 / 31 / 15 Report Type: 11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 10.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,046.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 90.00

(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) YON TOV VIVI ASSIDON

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

X ASSIDON
Signature

(Type name) YON TOV VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X ASSIDON
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOUNG TON VIVI ASSIDON (2) I.D. Number _____
 (3) Cover Period 1/1/15 through 1/31/15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
1/20/15	AMTRUST BANK 4100 W OLLMUND PARKWAY SUNRAISE FL 33320	FEF	CAN	ADD	10
1					
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CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:24

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

15 FEB 10 AM 8:55

OFFICE USE ONLY

Yamtor Vivi Assidon
Name

Sunrise City Commissioner Group A
Office Sought 2010

824 NW 130th Terrace
Address

Sunrise FL 33325
City State Zip Code

- Candidate
 Political Committee
 Electioneering Communications Organization
 Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

- MONTHLY REPORT
 PRIMARY ELECTION
 GENERAL ELECTION
 OTHER REPORT TYPE

Indicate report #
M 1

Indicate report #
P _____

Indicate report #
G _____

Indicate report type and # as applicable:

- TERMINATION REPORT
 SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

1/1/15 THROUGH 1/31/15

X [Signature]
Signature

2/9/15
Date

X [Signature]
Signature

Date

- REQUIRED SIGNATURES FOR:**
- Candidates:**
Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
 - Political Committees:**
Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)
 - Electioneering Communications Organizations:**
Treasurer (s. 106.0703(4)(c), F.S.)
 - Party Executive Committees:**
Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOV VIVI ASSIDOU
 Name

(2) 824 NW 130 TARCIE
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

15 SEP 18 AM 10:24
 CLERK
 CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SUNRISE COMMISSION GROUP A

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 12 / 1 / 14 To 12 / 31 / 14 Report Type: A12

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 040 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 80 . 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) YOM TOV VIVI ASSIDOU

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

(Type name) YOM TOV VIVI ASSIDOU

Candidate Chairperson (only for PC and PTY)

X

ASSIDOU

Signature

X

ASSIDOU

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Yan Tov Vri Assessor (2) I.D. Number _____
 (3) Cover Period 12 / 1 / 14 through 12 31 / 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					
12/19/14	AMTINS T M LANE 9100 W OLCHESTER PARK SUNRISE FL 33325	FEF	CAN	APM	10
1 /					
1 /					
1 /					
1 /					
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1 /					
1 /					
1 /					
1 /					

15 SEP 18 AM 10:24
 CITY CLERK
 CITY OF SUNRISE

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

15 JAN -7 AM 11:05

OFFICE USE ONLY

Yonira Vivi Assidon
Name

Sunrise City Commissioner Group A
Office Sought 2014

824 NW 130th Terrace
Address

Sunrise FL 33325
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #
M 12

Indicate report #
P _____

Indicate report #
G _____

Indicate report type and #
as applicable:

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

12/1/14

THROUGH

12/31/14

X [Signature]
Signature

1/6/15
Date

X ASSIDON
Signature

1/6/15
Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:24

(1) YOM TOU VIVI ASSIDOU
 Name

(2) 824 NW 130 TERRACE
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

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

(5) Report Identifiers

Cover Period: From 11 / 1 / 14 To 11 / 30 / 14 Report Type: A 11

Original
 Amendment
 Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 10.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,040.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 70.00

(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) YOM TOU VIVI ASSIDOU

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

(Type name) YOM TOU VIVI ASSIDOU

Candidate
 Chairperson (only for PC and PTY)

X ASSIDOU
 Signature

X ASSIDOU
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOUTOV VIVI ASSISOR

(2) I.D. Number _____

(3) Cover Period 11/1/14 through 11/30/14

(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					
11/30/14	AMTRUST BANK 9100 W OAKLAND PKWY SUNRISE FL 33	FEE	CAN	ADD	10
1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

CITY CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:24

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

14 DEC 10 AM 9:45

OFFICE USE ONLY

Yamtao Vivian Assidon
Name

Sunrise City Commissioner Group A.
Office Sought 2014

824 NW 138th Terrace
Address

Sunrise FL 33325
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #

M 11

Indicate report #

P _____

Indicate report #

G _____

Indicate report type and # as applicable:

TERMINATION REPORT SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

11/1/14

THROUGH

11/30/14

X

[Signature] - Yamtao Assidon
Signature

12/9/14
Date

Date

X

[Signature]
Signature

12/9/14
Date

Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

15 SEP 18 AM 10:21
 CITY OF SUNRISE
 CLERK

(1) YAMTOU VIVI ASSIDOU
 Name

(2) 824 NW 130TH TRAIL
 Address (number and street)

SHARISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: SHARISE COMMISSION GROUP A

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 10 / 1 / 14 To 10 / 31 / 14 Report Type: A10

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 00 . 00

Loans \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 0 . 0

In-Kind \$ _____ , _____ , 0 . 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 090 . 02

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 60 . 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) YAMTOU VIVI ASSIDOU

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

(Type name) YAMTOU VIVI ASSIDOU

Candidate Chairperson (only for PC and PTY)

X ASSIDOU
 Signature

X ASSIDOU
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YONTOU VINI ASSIDON

(2) I.D. Number _____

(3) Cover Period 10 / 1 / 14 through 10 / 31 / 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
12/30/14 1	ANTHONY BROWN 9126 W OAKLAND PARK SHARISFIELD 33367	FEE	CAN	AD	10
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					
1 / 1					

CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:24

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

1 NOV 10 PM 12:10

OFFICE USE ONLY

Yomtov Vin Assidon
Name

Sunrise City Commissioner Group A
Office Sought 2016

824 NW 13th Terrace
Address

Sunrise FL 33325
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #
M 10

Indicate report #
P _____

Indicate report #
G _____

Indicate report type and #
as applicable:

TERMINATION REPORT SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

10/1/14 THROUGH 10/31/14

X [Signature] Yael Assidon
Signature

11/6/14
Date

X [Signature]
Signature

11/6/14
Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOMTOU VIVI ASSIDON
Name

(2) 824 NW 130th TERACE
Address (number and street)

SWANRISE FLA 33325
City, State, Zip Code

OFFICE USE ONLY

15 SEP 18 AM 10:23

CLERK

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SWANRISE COMMISSION GROUP A
- 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 9 / 1 / 14 To 9 / 30 / 14 Report Type: 19

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 10 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 10 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 040 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 50 . 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) YOMTOU VIVI ASSIDON

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

(Type name) YOMTOU VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

X ASSIDON
Signature

X ASSIDON
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YONG TON VIVI HASSIAU

(2) I.D. Number _____

(3) Cover Period 9, 1, 14 through 9, 30, 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					
9/19/14	ARMSTRONG, GAVIN 9100 WOODLAND PARK SUNNYSIDE FLA 33551	FEE	CAN	ADD	10
1					
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15 SEP 18 AM 10:23
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YUM TOU VW ASSIDON (2) I.D. Number _____

(3) Cover Period 9 / 1 / 14 through 9 / 30 / 14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
9 / 17 / 14	AMTARST BANK 9100 W 04th Ave Sunrise, FL 33351	B	BANK	REF		ADD	10 ⁰⁰
1							
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/ /							
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CITY CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:24

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE

14 OCT -8 AM 10:08

OFFICE USE ONLY

Yomtov Vivi Assidon
Name

Sunrise City Commissioner Group A
Office Sought 2016

824 NW Both terrace
Address

Sunrise FL 33328
City State Zip Code

Candidate

Political Committee

Electioneering Communications Organization

Party Executive Committee

Check here if address has changed since last report.

Check here if PC or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #

M 9

Indicate report #

P _____

Indicate report #

G _____

Indicate report type and # as applicable:

TERMINATION REPORT SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

9/1/14

THROUGH

9/30/14

X

[Signature]

Signature

Yael Assidon

10/7/14

Date

X

[Signature]

Signature

Yomtov Vivi Assidon

10/7/14

Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Electioneering Communications Organizations:

Treasurer (s. 106.0703(4)(c), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOM TOV VIVI ASSIDOR
Name

(2) 824 NW 130TH TRL
Address (number and street)

SUNRISE FL 33325
City, State, Zip Code

OFFICE USE ONLY

15 SEP 18 AM 10:23

COUNTY CLERK
COUNTY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 8 / 1 / 14 To 8 / 31 / 14 Report Type: MR

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 00.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 10.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2, 030.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 10.00

(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) YOM TOV VIVI ASSIDOR

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

X ASSIDOR
Signature

(Type name) YOM TOV VIVI ASSIDOR

Candidate Chairperson (only for PC and PTY)

X ASSIDOR
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM TOV VIVI ASSIDON (2) I.D. Number _____
 (3) Cover Period 8 / 1 / 14 through 8 / 31 / 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					
8/20/14	ATMIST BANK 9100 W OKLAHOMA PAN SURPRISE FL 33351	FEE	CAN	ADD	10
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COUNTY CLERK
 COUNTY OF SUNRISE
 15 SEP 18 AM 10:23

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Yomtov Vivvi Assidon
 Name

(2) 824 NW 135th Terrace
 Address (number and street)

Sunrise FL 33325
 City, State, Zip Code

OFFICE USE ONLY

14 SEP 10 AM 10:12

CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Sunrise City Commissioner Group A 2010

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 08/01/14 To 08/31/14 Report Type: MS

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,000.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 0.00

(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) Yael Assidon

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

X _____
 Signature

(Type name) Yomtov Vivvi Assidon

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY OF SUNRISE
 CLERK
 15 SEP 18 AM 10:28

(1) YOM TOU VIUI ASSIDON
 Name

(2) 824 NW 130 7th TRAIL
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 7 / 1 / 14 To 7 / 31 / 14 Report Type: 17

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 20.00

Loans \$ _____ , _____ , 0.00

Total Monetary \$ _____ , _____ , 0.00

In-Kind \$ _____ , _____ , 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 10.00

Transfers to Office Account \$ _____ , _____ , 0.00

Total Monetary \$ _____ , _____ , 0.00

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2,030.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 30.00

(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) YOM TOU VIUI ASSIDON

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

(Type name) YOM TOU VIUI ASSIDON

Candidate Chairperson (only for PC and PTY)

X ASSIDON
 Signature

X ASSIDON
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YAN TOU VIVI ASSIDON (2) I.D. Number _____
 (3) Cover Period 7/1/14 through 7/31/14 (4) Page _____ of _____

(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					
7/18/14	AMTRUST BANK 9100 W ORCHARD PARK SUNRISE FL 33351	CAN	FEE	APP	10 ⁰⁰
1					
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CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:23

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YAN TON VIVI ASSIDON (2) I.D. Number _____

(3) Cover Period 7 / 1 / 14 through 7 / 31 / 14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
7, 15, 14 1	AMTRIST BANK 9100 W OULAND PI SEMINOLE 33351		BANK	REF		ADD	10 ⁰⁰
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CITY CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:23

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE
14 AUG - 6 PM 1:00

(1) Yomtov Vivi Assidon
Name

(2) 824 NW 130th terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

OFFICE USE ONLY

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2016
- 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 07/01/14 To 07/31/14 Report Type: M7

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,000.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0.00

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

[Signature]
Signature

(Type name) Yomtov Vivi Assidon
 Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YOR TOU VIVI ASSIDOU
Name

(2) 824 NW 130th TERRACE
Address (number and street)

SUNRISE FL 33325
City, State, Zip Code

OFFICE USE ONLY

15 SEP 18 AM 10:23

CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 6 / 1 / 14 To 6 / 30 / 14 Report Type: A6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . 00

Loans \$ _____, _____, 0 . 00

Total Monetary \$ _____, _____, 0 . 00

In-Kind \$ _____, _____, 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 10 . 00

Transfers to Office Account \$ _____, _____, 0 . 00

Total Monetary \$ _____, _____, 0 . 00

(8) Other Distributions

\$ _____, _____, _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2 , 010 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 20 . 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) YOR TOU VIVI ASSIDOU

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

(Type name) YOR TOU VIVI ASSIDOU

Candidate Chairperson (only for PC and PTY)

X ASSIDOU
Signature

X ASSIDOU
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YOM TOU VIVI ASSIDON

(2) I.D. Number _____

(3) Cover Period 6, 1, 14 through 6, 30, 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					
6/20/14	AMTRAST BANK 9100 W ORLAND PARK BLVD SUNRISE FL 33351	BANK FEE	CAN	ADD	10
1					
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CITY CLERK
 CITY OF SUNRISE
 15 SEP 18 AM 10:23

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YANTOU VIVI ASSIDON
 Name
 (2) 824 NW 130th terrace
 Address (number and street)
SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
14 JUL -2 PM 1:06

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE City Commissioner Group A 2016
- 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 06/01/14 To 06/30/14 Report Type: MP
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00
 Loans \$ _____, _____, 0.00
 Total Monetary \$ _____, _____, 0.00
 In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00
 Transfers to Office Account \$ _____, _____, 0.00
 Total Monetary \$ _____, _____, 0.00

(8) Other Distributions
 \$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date
 \$ _____, 2,000.00

(10) TOTAL Monetary Expenditures To Date
 \$ _____, _____, 0.00

(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) Yael Assidon
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
 X [Signature]
 Signature

(Type name) Yantou Vivi Assidon
 Candidate Chairperson (only for PC and PTY)
 X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISSE
 15 SEP 18 AM 10:23

(1) YOMTOU VIVI ASSIDON
 Name

(2) 324 NW 130TH AVENUE
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: SUNRISE COMMISSION GROUP A
- 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 5 / 1 / 14 To 5 / 31 / 14 Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 510.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 510.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 10.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,010.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 10.00

(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) YOMTOU VIVI ASSIDON

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

ASSIDON
 Signature

(Type name) YOMTOU VIVI ASSIDON

Candidate Chairperson (only for PC and PTY)

ASSIDON
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name YOMTOU VIVI ASSIDON (2) I.D. Number _____

(3) Cover Period 5 / 1 / 14 through 5 / 31 / 14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
5, 27, 14	AMT TRAST BANK 9100 W ORLAND PARK BLVD SUMMIT, FL, 33337	BANK	BANK	REF		ADD	10.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

15 SEP 18 AM 10:29
 CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name YON TUV VIVI ASSIDON (2) I.D. Number _____

(3) Cover Period 5 / 1 / 14 through 5 / 31 / 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
5/20/14	AATRASI BANK 9100 WOODLAND PARK BLVD SUNRISE FL 33357	BANK FEE	CAN	ADD-	10
///					
///					
///					
///					
///					
///					
///					
///					

CITY CLERK
CITY OF SUNRISE
15 SEP 18 AM 10:23

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) YANTON VIVI ASSIDON
 Name

(2) 824 NW 130th Terrace
 Address (number and street)

SUNRISE FL 33325
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
 CITY OF SUNRISE

14 JUN -9 AM 10:01

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- | | |
|--|--|
| <input type="checkbox"/> Candidate Office Sought: <u>SUNRISE CITY COMMISSIONER Group A 2016</u> | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY) | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | |

(5) Report Identifiers

Cover Period: From 05 / 01 / 14 To 05 / 31 / 14 Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 500.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 500.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 2,000.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0.00


(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:

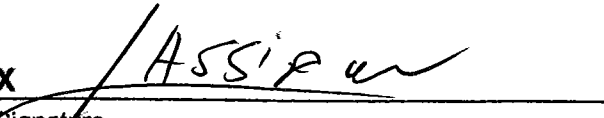
(Type name) Yael Assidon

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

X 
 Signature

(Type name) Yanton Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Yomton U. Ji Assidon (2) I.D. Number _____

(3) Cover Period 05/07/14 through 05/31/14 (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
5/27/14	Broward County Council of Professional Fire Fighters PAC account 304 NE 1st St Pompano Beach FL 33060	Ind. F	6/12 PAC	CHE	N		500.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CITY CLERK
 CITY OF SUNRISE
 14 JUN -9 AM 10:00

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY
CITY CLERK
CITY OF SUNRISE

14 MAY -7 PM 4:02

(1) Yomtov Vivi Assidon
Name

(2) 824 NW 130th terrace
Address (number and street)

Sunrise FL 33305
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2016
- 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 04 / 01 / 14 To 04 / 30 / 14 Report Type: M4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 000 . 00

Loans \$, , 500 . 00

Total Monetary \$, 1 , 500 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 1 , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 0 . 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) Yael Assidon

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

X [Signature]
Signature

(Type name) Yom-tov Vivi Assidon

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Yam-tou Vivii Assidan (2) I.D. Number _____

(3) Cover Period 04, 01, 14 through 04, 30, 14 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code						
04, 05, 14 1	Assidan, Yam-tou 824 NW 130th Sunrise FL 33325	S	Self-employed	Loan	N		\$500.00
04, 15, 14 2	Metro Broward Professional Firefighters PAC account 304 NE 1st Street Pompano Beach, FL 33060	A F	N 6/2 PE	CHE	N		\$1,000.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

14 MAY - 7 PM 4:02
 CITY CLERK
 CITY OF SUNRISE

**CITY CLERK
CITY OF SUNRISE
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY
14 APR -9 AM 10:19

(1) Yael for Vivi Assidon
Name

(2) 824 NW 130th Terrace
Address (number and street)

Sunrise FL 33325
City, State, Zip Code

Check here if address has changed

(3) ID Number: 46-5255796

(4) Check appropriate box(es):

- Candidate Office Sought: Sunrise City Commissioner Group A 2014
- 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 03/31/14 Report Type: M3

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0.00

Loans \$, , 0.00

Total Monetary \$, , 0.00

In-Kind \$, , 0.00

(7) Expenditures This Report

Monetary Expenditures \$, , 0.00

Transfers to Office Account \$, , 0.00

Total Monetary \$, , 0.00

(8) Other Distributions

\$, , 0.00

(9) TOTAL Monetary Contributions To Date

\$, , 0.00

(10) TOTAL Monetary Expenditures To Date

\$, , 0.00

(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) Yael Assidon

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

X [Signature]
Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

F

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

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

(PLEASE PRINT OR TYPE)

CITY CLERK
CITY OF SUNRISE

14 JUN 12 AM 8:55

**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)
Yamtor VIVI Assidon

3. Address (include post office box or street, city, state, zip code)
824 NW 130th terrace
Sunrise FL 33325

4. Telephone
(954) 4396091

5. E-mail address
vivi.assidon@gmail.com

6. Office sought (include district, circuit, group number)
Sunrise City Commission Group A 2014

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
Yamtor VIVI Assidon

11. Mailing Address
824 NW 130th terrace

12. Telephone
(954) 4396091

13. City
Sunrise

14. County
Broward

15. State
FL

16. Zip Code
33325

17. E-mail address
vivi.assidon@gmail.com

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

19. Name of Bank

20. Address

21. City

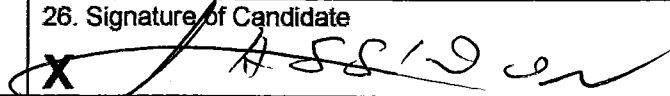
22. County

23. State

24. Zip Code

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
6/10/14

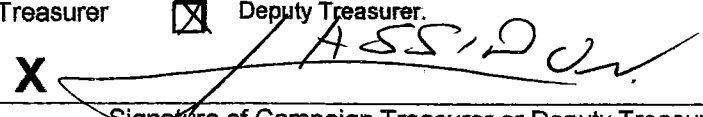
26. Signature of Candidate


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

I, Yamtor VIVI Assidon, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/10/14
Date


Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

CITY CLERK
CITY OF SUNRISE

14 MAR 12 AM 10:07

(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):

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

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

Yonhov vivi Assidon

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

824 NW 130th terrace
Sunrise, FL 33325

4. Telephone

(954) 4396091

5. E-mail address

vivi.assidon@gmail.com.

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

Sunrise City Commission Group A
2016

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

Yael Assidon

11. Mailing Address

824 NW 130th Terrace

12. Telephone

(954) 6089856

13. City

Sunrise

14. County

Broward

15. State

FL

16. Zip Code

33325

17. E-mail address

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

19. Name of Bank

Chase

20. Address

12590 W Sunrise Blvd

21. City

Sunrise

22. County

Broward

23. State

FL

24. Zip Code

33323

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

3/11/14

26. Signature of Candidate



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

I, Yael Assidon, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3/11/14
Date


Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

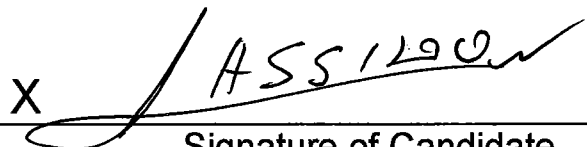
(Please print or type)

OFFICE USE ONLY

14 MAR 12 AM 10:07

CITY CLERK
CITY OF SUNRISE

I, Yomtov Vivi Assidon,
candidate for the office of Sunrise City Commission Group A 2016
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X 
Signature of Candidate

3/11/14
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).

CITY CLERK
CITY OF SUNRISE

16 JUN 20 PM 1:23



NOTICE OF CANDIDACY AND AFFIDAVIT

I, Yontau Assidan, do hereby affirm that I am a candidate for the office of Commissioner Group A, City of Sunrise, in Broward County, Florida, in the General Election to be held on November 8, 2016, that I am qualified to serve in said office and will serve if elected; and that I am an elector of the City of Sunrise who has resided continuously within the City of Sunrise, Broward County, Florida, for a period of one (1) year prior to qualifying as a candidate for City Commissioner.

ASSIDAN

Signature
6/20/16

Date

STATE OF FLORIDA
COUNTY OF BROWARD
CITY OF SUNRISE

The foregoing instrument was sworn to (or affirmed) and subscribed before me this 20th day of June, 2016, by Yontau Assidan.



FELICIA BRAVO
MY COMMISSION # EE 845644
EXPIRES: February 11, 2017
Bonded Thru Budget Notary Services

Felicia Bravo

, Notary Public

(seal)

Personally Known OR Produced Identification _____
Type of Identification Produced _____

City Charter Section 3.02 Qualifications.

Any elector of the City of Sunrise who has resided continuously in the city for one (1) year prior to qualifying as a candidate for the office shall be eligible to hold the office of City Commissioner, or Mayor.

(Ord. No. 517, § 3, 8-10-10/Ref. of 11-2-10)

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

CITY CLERK
CITY OF SUNRISE

16 JUN 20 PM 1:23

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, Vivi Assidon

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

am a candidate for the nonpartisan office of Commissioner, _____, _____,
(office) (district #)
_____ County, Florida;
(circuit #) A (group or seat #); I am a qualified elector of Broward County, Florida;

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

X ASSIDON (1954) 439-6091 VIVI.ASSIDON@GMAIL.COM
Signature of Candidate Telephone Number Email Address

24 NW 130 TERRACE SUNRISE FLA. 33325
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 101623827

* 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):

VEE-VEE AH-SEE-DON

STATE OF FLORIDA
COUNTY OF Broward

Sworn to (or affirmed) and subscribed before me this 20th day of June, 2016.

Personally Known: X or _____
Produced Identification: _____
Type of Identification Produced: _____



FELICIA BRAVO
MY COMMISSION # EE 845644
EXPIRES: February 11, 2017
Bonded Thru Budget Notary Services

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

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 :

ASSIDON YOM TOV

MAILING ADDRESS :

824 NW 130 TER.

SUNRISE 33325 BROWARD

CITY: ZIP: COUNTY:

CITY OF SUNRISE FLA

NAME OF AGENCY :

COMMISSION GROUP A

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

CIT

CITY CLERK
CITY OF SUNRISE
16 JUN 20 PM 1:23

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, 2015 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE 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 (must check one):

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, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
VIVI ELECTRONICS INC	824 NW 130 TER SUNRISE	RETAIL

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
NONE			

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

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

NONE

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, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Charles Schwab / Stocks	Charles Schwab Investments

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

NAME OF CREDITOR	ADDRESS OF CREDITOR

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

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
Vivi Electronics Inc		
824 NW 130th Trl		
Retail		
Owner / President		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

CITY CLERK
 CITY OF SUNRISE
 JUN 20 PM 1:33
 SE

PART G — TRAINING

For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

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

SIGNATURE OF FILER:

Signature:

JASSIDON

Date Signed:

6/20/16

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

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:

A candidate who previously filed Form 1 because of another public position must file a copy of his or her Form 1 when qualifying. A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

Facsimiles will not be accepted.

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; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see page 3 of instructions.

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 **not** relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2015.

CITY CLERK
CITY OF SUNRISE

16 JUN 20 PM 1:23



NOTICE OF LOGIC AND ACCURACY TEST

F.S. 101.5612 Testing of tabulating equipment.

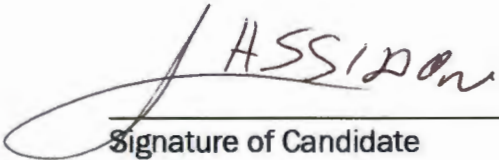
Notice is hereby given that the pre-election Logic and Accuracy test for the automatic tabulating equipment for the 2016 Primary and General Elections will take place as listed below. Attendance at this test of the equipment is strictly optional. You are welcome to observe.

VOTING EQUIPMENT CENTER
1501 NW 40 AVENUE
LAUDERHILL, FL
(954)712-1903

For Primary Election
For General Election

Wednesday, August 10, 2016
Wednesday, October 19, 2016

10:00 a.m.
10:00 a.m.


Signature of Candidate


Date

CITY CLERK
CITY OF SUNRISE

16 JUN 20 PM 1:23



**Receipt of
Sunrise Code of Ethics and
Sunshine Amendment and Code of Ethics for Public Officers
and Employees
Acknowledgement**

I have received, read and understand the City of Sunrise Code of Ordinances, Chapter 10, Article II, Code of Ethics and the Sunshine Amendment and Code of Ethics for Public Officers and Employees.

YOM TOU ASSIDON
Print Name

ASSIDON
Signature

6/20/16
Date

Broward County Statement of Ethical Campaign Practices

The Broward County Ethical Campaign Practices Act shall apply to any candidate for elected public office whose constituency resides, in whole or in part, within Broward County, or when the boundaries of the public office sought are located, in whole or in part, within the County. "Candidate" means any person to whom any one or more of the following applies:

- (1) Any person who seeks to qualify for nomination or election by means of the petitioning process;
- (2) Any person who seeks to qualify for election as a write-in candidate;
- (3) Any person who receives contributions or makes expenditures, with a view to bringing about his or her nomination or election to, or retention in, public office;
- (4) Any person who appoints a treasurer and designates a primary depository; or
- (5) Any person who files qualification papers and subscribes to a candidate's oath as required by law.

A candidate's decision regarding whether to execute the statement is strictly voluntary. A candidate executing the Statement of Ethical Campaign Practices shall file the original and a copy of the executed statement, bearing the candidate's signature, with the officer before whom the candidate qualifies within five (5) days after becoming a candidate for the elected public office.

As a candidate for public office in Broward County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore:

1. I shall not make my race, color, religion, gender, national origin, physical disability, or sexual orientation an issue in my campaign.
2. I shall not make my opponent's race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation an issue in my campaign.
3. I will condemn any appeal to prejudice based on race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation.
4. I shall not attack or question my opponent's patriotism.
5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement nor shall I tolerate or permit members of my campaign organization to engage in such activities.
6. I shall not tolerate nor permit members of my campaign organization to engage in activities designed to destroy or remove campaign materials or signs lawfully displayed on public or private property.
7. I shall not tolerate my supporters engaging in these activities which I condemn nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group which resorts to the methods and tactics that I hereby condemn.
8. I shall run a positive campaign emphasizing my qualifications for office and my positions on issues of public concerns and I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting an opponent's credibility.
10. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

Executed on this day 20 of June, 2016.

WITNESSES:

[Signature]
Avi Assidon

BY CANDIDATE:

[Signature]
 Signature
YON TOV ASSIDON
 (Print Name)

16 JUN 20 PM 1:24
 CITY CLERK
 CITY OF SUNRISE

STATE OF FLORIDA)
) SS.
 COUNTY OF Broward)

The foregoing instrument was acknowledged before me this 20th day of June 2016, by Yon tov Assidon who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

WITNESS my hand and official seal, this 20th day of June, 2016.

(NOTARY SEAL)

[Signature]
 (Signature of person taking acknowledgment)

(Name of officer taking acknowledgment)
typed, printed, or stamped
FELICIA BRAVO

My commission expires:



MY COMMISSION # EE 845644
 EXPIRES: February 11, 2017
 Bonded Thru Budget Notary Services