

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE

(1) Lawrence Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

Sunrise, FL 33313
City, State, Zip Code

OFFICE USE ONLY

19 FEB -4 AM 10:14

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group D

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 / 02 / 18 To 02 / 04 / 19 Report Type: TR

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ . 0

Loans \$ _____ . 0

Total Monetary \$ _____ . 0

In-Kind \$ _____ . 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 6 , 619 . 09

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

Total Monetary \$ _____ , 6 , 619 . 09

(8) Other Distributions

\$ _____ , _____ , _____ . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , 48 , 261 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 47 , 067 . 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) Katherine Sofield

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

X [Signature]

Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lawrence Sofield

(2) I.D. Number _____

(3) Cover Period 11/02/18 through 02/04/19

(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					
11/12/18	Beverly Armstrong 7520 SW 6th St N. Lauderdale, FL 33068	Campaign worker	MON		500
27					
11/16/18	Beverly Armstrong 7520 SW 6th St N. Lauderdale, FL 33068	Campaign worker	MON		1200
28					
11/16/18	El Molino Restaurant 3457 Hiatus Road Sunrise, FL 33351	Food & Beverage	MON		2000
29					
11/16/18	Kerron Ewen 7202 NW 71 Ave Tamarac, FL 33321	Campaign worker	MON		750
30					
11/16/18	Face Book Menlo Park, CA.	Advertising	MON		63.81
31					
1/12/19	Bank of America PO Box 15284 Wilmington, DE 19850	Bank Fees	MON		17
32					
1/11/19	Barbara Miller 442 Poinciana Dr Hollandale, FL 33009	Campaign Management	MON		2088.28
33					
1/1					

CITY OF SUNRISE
CITY CLERK
19 FEB -4 AM 14

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
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(2) 6601 NW 27 Street
Address (number and street)

Sunrise, FL 33313
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
18 NOV -2 PM 12:58

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group D

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 / 20 / 18 To 11 / 01 / 18 Report Type: G7

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, 2 , 750.00

Loans \$, , .

Total Monetary \$, , .

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, 26 , 774.00

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 48 , 261.00

(10) TOTAL Monetary Expenditures To Date

\$, 40 , 447.91

(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) Katherine Sofield

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

X [Signature]
Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 10/20/18 through 11/1/18 (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
10, 26, 18	Okoecho bee Landfill Inc 2700 NW 48 Street Pompano Beach, FL 33073	B	Waste management	Che			500 ⁰⁰
126							
10, 26, 18	Waste Management Inc of Florida 2700 Wiles Rd Coconut Creek, FL 33073	B	Waste management	Che			500 ⁰⁰
127							
11, 1, 18	Miami Realtors PAC 7005 Royal Poinciana Blvd #400 Miami Springs FL 33146	B	Real Estate	Che			1000 ⁰⁰
128							
11, 1, 18	Peter Moore 915W Las Olas Blvd Ft Lauderdale FL 33312	I	Architect	Che			250 ⁰⁰
129							
11, 1, 18	Martin Gold Coast LLC 150 NW 70 Ave Suite 5 Plantation, FL 33317	B	Advertising	Che			500 ⁰⁰
130							
1 1							
1 1							

18 NOV - 2 PM 12:58
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lawrence Sofield

(2) I.D. Number _____

(3) Cover Period 10, 2018 through 11, 1, 18

(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					
10/23/18	Face Book Mowlo Park, CA	Ads	MON		75 ⁰⁰
24					
10/27/18	National Campaign Resources 11380 Prosperity Farms Rd # 221 E Palm Bch Gdns, FL 33410	Mail Ads.	MON		26,574. ⁰⁰
25					
10/31/18	Face Book Mowlo Park, CA.	Ads	MON		125 ⁰⁰
26					
11					
11					
11					
11					
11					

18 NOV - 2 PM 12-56
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

Sunrise, Fl. 33313
City, State, Zip Code

OFFICE USE ONLY

18 OCT 26 PM 12:49
CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group D

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 10/06/18 To 10/19/18 Report Type: G6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,750.00

Loans \$ 0

Total Monetary \$ 1,750.00

In-Kind \$ 0

(7) Expenditures This Report

Monetary Expenditures \$ 2,188.95

Transfers to Office Account \$ 0

Total Monetary \$ 2,188.95

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 45,511.00

(10) TOTAL Monetary Expenditures To Date

\$ 13,873.91

(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) Katherine Sofield

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

X [Signature]
Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence SoField (2) I.D. Number _____

(3) Cover Period 10, 16, 18 through 10, 19, 18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
10, 5, 18 123	West way trusty 3681 W Bakland Pk Blvd Lauderdale Lakes FL 33311	B	Towing co	Che			500 ⁰⁰
10, 16, 18 124	Gray Robinson PA FL Political Actin Committce 301 E Pine St #400 Orlando, FL 32801	B	Attorney	Che			250 ⁰⁰
10, 17, 18 125	Realtors Political Advocacy Comm. 7025 Augusta National Dr Orlando, FL 32822	B	Realtors	Che			1000 ⁰⁰
1 1							
1 1							
1 1							
1 1							

18 OCT 26 PM 12:49
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lawrence Sofield

(2) I.D. Number _____

(3) Cover Period 10, 6, 18 through 10, 19, 18

(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					
10/9/18	Direct Checkers	Checkers	MON		12.14
19					
10/9/18	Face Book Menlo Park, CA	Ads.	MON		75.-
20					
10/10/18	Real Signs, Inc 10293 NW 53 St Sunrise, FL 33351	Signs	MON		854.28
21					
10/14/18	Face Book Menlo, Park, CA.	Ads	MON		72.53
22					
10/18/18	National Campaign Resource 11380 Prosperity Rd #221-E Paln Bch, FL 33410	Handout Cards	MON		1175.-
23					
11					
11					
11					

18 OCT 26 PM 12:49
CITY CLERK
CITY OF SUNRISE

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Sanrise, FL 33313
City, State, Zip Code

Check here if address has changed

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group D

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

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

(3) ID Number: _____

OFFICE USE ONLY

18 OCT 11 PM 3:13
 CITY OF SUNRISE
 CLERK

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

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

(5) Report Identifiers

Cover Period: From 09/01/18 To 10/05/18 Report Type: G4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 12,262.00

Loans \$ _____

Total Monetary \$ 12,262.00

In-Kind \$ 994.00

(7) Expenditures This Report

Monetary Expenditures \$ 3,088.30

Transfers to Office Account \$ 0

Total Monetary \$ 3,088.30

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 43,761.00

(10) TOTAL Monetary Expenditures To Date

\$ 11,684.96

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

X [Signature]
Signature

(Type name) Lawrence Sofield
 Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9 / 1 / 18 through 10 / 5 / 18 (4) Page 1 of 9

(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
9.9.18 60	Lorelei Boyden 6591 NW 26 St Sunrise, FL 33313	I	retired	che			\$75 ⁰⁰
9.4.18 61	John E Brooks 236N W 101 Ave Plantation, FL 33324	I	Retired	che			100 ⁰⁰
9.4.18 62	Wheelabrator SB rward Inc 100 Arboretum Dr #310 Port sm. tn, NH 03801	B	Fuel sourcing	che			\$1000 ⁰⁰
9.12.18 63	Barry Fox 2541 Nob Hill Rd Sunrise, FL 33322	I	retired	che			25. ⁰⁰
9.11.18 64	Harvey Suf rine 2541 Nob Hill rd Apt 106 Sunrise, FL 33322	I	retired	che			25 ⁰⁰
9.11.18 65	Robert Norris 8957 NW 44 Ct Sunrise, FL 33351	I	retired	che			25 ⁰⁰
9.4.18 66	Barbara Hall 6721 SW 17 St Plantation, FL 33317	I	attorney	che			105 ⁰⁰

18 OCT 11 PM 3:13
CITY CLERK
OF SUNRISE

CAMPAIGN TREASURER'S REPORT ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9, 1, 18 through 10, 5, 18 (4) Page 2 of 9

(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	Amendment	Amount
9, 6, 18 67	Albert del Castillo 7050 Torphin Pl Miami, Lks, FL 33014	I	attorney	che			250 ⁰⁰
9, 17, 18 68	Robert Gung 2127 Brickell Ave # 2801 Miami, FL 33129	I	attorney	che			100 ⁰⁰
9, 5, 18 69	Sylvia Penneys 3188 Via Abitare Coconut Grove, FL 33133	I	attorney	che			100 ⁰⁰
9, 6, 18 70	Bruce Giles Klein 13430 SW 69 Ct Miami, FL 33156	I	attorney	che			100 ⁰⁰
9, 6, 18 71	Tracy Lautenschlager 3521 Southern Orchard Rd E Davie, FL 33328	I	attorney				
9, 18, 18 72	Mary Ann Cassella 2541 N Nob Hill Rd #201 Sunrise, FL 33322						26 ⁰⁰
9, 22, 18 73	Bernard Shaw 11960 NW 34 Pl Sunrise, FL 33323	I	retired	cas			10 ⁰⁰

18 OCT 11 PM 3:14
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9, 1, 18 through 10, 5, 18 (4) Page 3 of 9

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type	(9) Occupation	(10) Contribution Type	(11) In-kind Description	(12) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
9, 22, 18 74	Paula Prusinski 4925 SW 12 ST Margate, FL 33068	1	Budget Analyst	Cas			30.00
9, 22, 18 75	Debra Amaro 6441 NW 24 PL Sunrise, FL 33313	1	Maintenance sewp	Cas			50.00
9, 22, 18 76	Maurice Hm 6010 NW 24 CT Sunrise, FL 33313	1	Chess club coord.	Cas			40.00
9, 22, 18 77	Millie Perez 9281 NW 19 PL Sunrise, FL 33322	1	Project coord	Cas			10.00
9, 22, 18 78	Jenemy Sofield 10295 DWS3 ST Sunrise, FL 33351	1	Sign installer	Cas			50.00
9, 22, 18 79	Marta Williams 3341 Jackson Blvd Arlauderdale, FL 33312	1	Business Manager	Cas			50.00
9, 22, 18 80	Robert Page 6591 NW 27 ST Sunrise, 33313	1	Auto Tech	Cas			50.00

18 OCT 11 PM 3:14
26
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9, 1, 1, 18 through 10, 5, 18 (4) Page 4 of 9

(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
9, 22, 18 81	Beth Perez 11441 NW 30 P Sunrise, FL 33351	1	Accountant	Cas			7 ⁰⁰
9, 22, 18 82	Kyle Porter 8010 NW 96 Terr #308 Tamarac, FL 33321	1	Auto Parts Tech	Cas			40 ⁰⁰
9, 22, 18 83	Michele Delivo 5680 Pinecrest Cir Boca Raton, FL 33433	1	CCPD Supervisor	Cas			30 ⁰⁰
9, 22, 18 84	Paul Heinrich 9131 NW 31 Pl Sunrise, FL 33351	1	Inspector	Cas			25 ⁰⁰
9, 22, 18 85	Gene Heinrich 9131 NW 31 Pl Sunrise, FL 33351	1	Real Estate	Cas			25 ⁰⁰
9, 22, 18 86	Delores Duncan 442 Ponciana Dr Hallandale, FL 33009	1	Retired	Cas			25 ⁰⁰
9, 22, 18 87	TO by Ginsbers Coben 9081 Sunrise Lakes Blvd Sunrise, FL 33322	1	Movie On-line	Cas			20 ⁰⁰

DS-DE 13 (Rev. 11/13) 18 OCT 11 PM 3:11 SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____
 (3) Cover Period 9, 1, 1, 18 through 10, 1, 5, 18 (4) Page 5 of 9

(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		
9, 23, 18 88	Sandra Coleman 726 Tyler St Hollywood, FL 33019	1		che			50 ⁰⁰
9, 22, 18 89	Cheryl Beard 4411 NW 129 Ave Sunrise, FL 33323	1	Accountant	che			75 ⁰⁰
9, 22, 18 90	Lorna Chin Barrant 4008 Del Rio Way Sunrise, FL 33357	1	insurance	che			100 ⁰⁰
9, 20, 18 91	Asset Leaders 17180 Royal Palm Blvd #9 Weston, FL 33326	B	property holder	che			500 ⁰⁰
9, 22, 18 92	Thomas Kerch 8570 NW 31 Ct Sunrise, FL 33351	1	student	che			10 ⁰⁰
9, 22, 18 93	Nidia Repinski PO Box 457018 Ft Lauderdale, FL 33305	1	Accountant	che			25 ⁰⁰
9, 22, 18 94	Marjorie Forrest 4427 N Andrews Ave Oakland Park FL 33309	1	Business owner	che			25 ⁰⁰

DS-DE 13 (Rev. 11/15) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9/1/18 through 10/5/18 (4) Page 6 of 9

(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
9.22.18 95	Robin Bartleman 16427 Sapphire Pl Weston, FL 33331	1	School Board	che			45 ⁰⁰
9.22.18 96	Tiffany Posario 10220 NW 31 Ct Sunrise, FL 33351	1	Entertainer	che			50 ⁰⁰
9.22.18 97	Stephany Robinson 6651 NW 27 St Sunrise, FL 33313	1	Self employed	che			50 ⁰⁰
9.22.18 98	Carmen Kerch 8570 NW 31 Ct Sunrise, FL 33351	1	maintenace	che			100 ⁰⁰
9.22.18 99	Terrance Duffy 3981 NW 119 Ave Sunrise, FL 33323	1	Police Officer	che			100 ⁰⁰
9.22.18 100	Michael J Ryan 1249 NW 32 Ave Sunrise, FL 33323	1	attorney	che			100 ⁰⁰
9.18.18 101	Jose Martin [REDACTED] [REDACTED]		Police Officer	che			120 ⁰⁰

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9, 1, 18 through 10, 5, 18 (4) Page 7 of 9

(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
9, 22, 18	Barbara Miller 442 Poncia Ave Hallandale, FL 33009	1	Campaign Manager	che			150 ⁰⁰
102							
9, 22, 18	Norma Perez 4710 NW 113 Terr Sunrise, FL 33323	1	retired	che			200 ⁰⁰
103							
9, 22, 18	Broward Auto Diagnostic 10791 NW 53 St #109 Sunrise, FL 33357	B	Auto Repair	che			250 ⁰⁰
104							
9, 22, 18	John Millledge 200 SW 1 Avenue Suite 800 Ft Lauderdale FL 33301	1	attorney	che			500 ⁰⁰
105							
9, 15, 18	Calvin, Giordano & Assoc 1800 Eller Dr #600 Ft Lauderdale FL 33316	B	Engineering em sub bts	ck			500 ⁰⁰
106							
9, 22, 18	Gordon, Crawford [REDACTED] [REDACTED]	1	SFD	ck			1000 ⁰⁰
107							
9, 15, 18	Anna Fruscante 4021 Meridian Ave Miami, FL 33140	1	Director Lotus House	ck			1000 ⁰⁰
108							

DS-DE 13 (Rev. 11/13) 18 OCT 11 PM 3:15 SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9, 1, 18 through 10, 5, 18 (4) Page 8 of 9

(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
9, 18, 18	Matthew Scott 761 El Dorado Pkwy Plantation, FL 33317	1	attorney	che			250 ⁰⁰
109							
9, 24, 18	Steven Drath 311 W 50 St #6S New York, NY 10019	1	architect	che			500 ⁰⁰
110							
9, 24, 18	Paul Ramirez 311 W 50 St #6S New York, NY 10019	1	architect	che			500 ⁰⁰
111							
9, 23, 18	Jamie Telchin 19253 Nature's View Ct Boca Raton, FL 33498	1	architect	che			500 ⁰⁰
112							
9, 20, 18	Christopher Fin by 1331 Brickell Bay Dr # 1003 Miami, FL 33101	1	architect	che			500 ⁰⁰
113							
9, 24, 18	BC PBA 2650 WSR 84 Ft Lauderdale FL 33312	B	PBA	che			250 ⁰⁰
114							
9, 21, 18	Moskowitz, Mandel Salim + Siminitz, PA 800 Corporate Dr #600 Ft Lauderdale FL 33334	B	attorneys	che			250 ⁰⁰
115							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 9, 1, 1, 18 through 10, 5, 18 (4) Page 9 of 9

(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, 2, 18 116	David Siegel 9060 NW 11 Ct Plantation, FL 33322	1	Contractor	che			100 ⁰⁰
10, 2, 18 117	Stiles Corp 301 E Las Olas Ft Lauderdale FL 33301	B	Contractors	che			500 ⁰⁰
10, 5, 18 118	Arena Operating Company LTD 2555 Panthers Pkwy Sunrise, FL 33323	B	Sport entertainment	che			1000 ⁰⁰
10, 5, 18 119	Justice for FL Political Action Comm. Htee PO Box 30295 Ft Lauderdale, FL 33308	B	Attorneys	che			100 ⁰⁰
10, 5, 18 120	Neighbors Food Market 6041 W Sunrise Blvd Sunrise, FL 33313	B	Grocery Store	che			200 ⁰⁰
10, 5, 18 121	Sheila Alu [REDACTED]	I	Lawyer	che			100 ⁰⁰
09, 22, 18 122	Sawgrass Grand 3003 N University Sunrise, FL	B	Hotel	TWK	Reception and Print Tab		994 ⁰⁰

DS-DE 13 (Rev. 11/13) 8 OCT 11 PM 3:15 SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lawrence Sotfield

(2) I.D. Number _____

(3) Cover Period 09/01/18 through 10/05/18

(4) Page 1 of _____

18 OCT 11 PM 9:15
 CITY CLERK
 CITY OF SUNRISE

(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	Amount
(6) Sequence Number					
9/12/18	Home Depot 2901 N. UNIV. DR. SUNRISE 33322	Sign Supplies Hardware	MON		196.08
10					
9/19/18	Face Book Menlo Park, CA.	Advertize	MON		25. ⁰⁰
11					
9/24/18	Face Book Menlo Park, CA	Advertize	MON		25. ⁰⁰
12					
9/24/18	Sawgrass Grand 3003 N. UNIV. DR. Sunrise 33322	Fundraiser Event Cost	MON		782. ²⁸
13					
9/25/18	Face Book Menlo Park, CA.	Advertize	MON		25. ⁰⁰
14					
9/28/18	Face Book Menlo Park, CA	Advertize	MON		35. ⁰⁰
15					
9/28/18	National Campaign Res. 11380 Prosperity Farms Rd # 221 E Palm Bch Cdn, FL 33410	Handouts	MON		1050. ⁰⁰
16					
10/3/18	Face Book Menlo Park, CA	Advertize	MON		50. ⁰⁰
17					

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lawrence S. Field

(2) I.D. Number _____

(3) Cover Period 9/01/18 through 10/01/18

(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
(6) Sequence Number					
10/3/18	No Graffiti 2684 Union Drive Lawrence, 33322	Maintenance Door hangers	Mon		899.94
18					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

18 OCT 11 PM 3:15
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

Sunrise, Fl. 33313
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
18 SEP 10 AM 11:13

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commission Group D
- 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 08/01/18 To 08/31/18 Report Type: M8

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,300.00

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) Expenditures This Report

Monetary Expenditures \$ 3,186.89

Transfers to Office Account \$ 0

Total Monetary \$ 0

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 30,505.00

(10) TOTAL Monetary Expenditures To Date

\$ 8,596.66

(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) Katherine Sofield

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

X [Signature]
Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sefield (2) I.D. Number _____

(3) Cover Period 08/01/18 through 08/31/18 (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	Amendment	Amount
08, 11, 18	Jennifer Gottlieb 715 Harrison St. Wolly wood, FL 33019	I		CHE			75 ⁰⁰
54							
08, 11, 18	L. Ralph Rickel PO Box 17413 Plantation, FL 33318	I	Realty.	CHE			100 ⁰⁰
55							
08, 11, 18	Don & Jackie Rodriguez 10400 NW 30 Ct #409 Sunrise, FL 33322	I	Retired	CHE			100 ⁰⁰
56							
08, 11, 18	Equity Land Title 525 Cherokee Blvd #1576 WPB - FL 33401	B	Real Estate Holdings	CHE			500 ⁰⁰
57							
08, 11, 18	Greenspan Marder, LLP 100 W. Cypress Rd #700 Ft. Lauderdale, FL 33309	B	Attorney	CHE			500 ⁰⁰
58							
08, 30, 18	Diana Zambardi 2901 Sunrise Lakes Blvd East 16-306 Sunrise, FL 33322	I		CHE			25 ⁰⁰
59							
1							

18 SEP 10 AM 11:14
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lawrence Sofield

(2) I.D. Number _____

(3) Cover Period 08/01/18 through 08/31/18

(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
08/07/18	4IMPRINT, Com 101 Commerce St. Oshkosh, WI 54901	Advertisement Handouts Pill box	MON		490. ⁹³
5					
08/09/18	Real Signs Inc 10293 NW 53 St Sunrise, Fl. 33351	Signs Auto Magnets	MON		637. ⁹⁴
6					
08/24/18	Real Signs, Inc. 10293 NW 53 St Sunrise, Fl. 33351	Lg & Small Signs & Stakes	MON		686. ⁸⁸
7					
08/30/18	HOME DEPOT 2901 N. UNIV. Dr Sunrise, Fl 33322	Hardware for Sign Installs.	MON		121. ¹²
8					
08/31/18	Notewial Campaign Resource 11380 Prosperity Farms Rd. # 221-E Palm Beach Gardens, Fl. 33410	Printed Handout Material	MON		1250. ⁰⁰
19					
/ /					
/ /					
/ /					

18 SEP 10 AM 11:14
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

Sunrise Fl. 33313
City, State, Zip Code

OFFICE USE ONLY

18 AUG 27 AM 9:41

CITY CLERK
CITY OF SUNRISE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group D

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 07/01/18 To 07/31/18 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 22,105.00

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 2,365.77

Transfers to Office Account \$ 0

Total Monetary \$ 0

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 29,205.00

(10) TOTAL Monetary Expenditures To Date

\$ 5,409.77

(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) Katherine Sofield

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

X K Sofield
Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 07/01/18 through 07/31/18 (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
07, 26, 18	Norma Perez 4710 NW 113 Fern Sunrise, FL 33323	/		CAS		DEL	150.-
52							
07, 26, 18	Norma Perez 4710 NW 113 Fern Sunrise, FL 33323	/		CAS		Add	50.-
52							
07, 26, 18	Candido Perez 4710 NW 113 Fern Sunrise, FL 33323	/		CAS		Add	50.-
53							
1 1							
1 1							
1 1							

18 AUG 27 AM 9:41
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

Sunrise Fla. 33313
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNR
18 AUG 10 PM 12: 7

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commission Group 0
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 02/01/18 To 07/31/18 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 22,105.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) Expenditures This Report

Monetary Expenditures \$ 2,365.77

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 29,205.00

(10) TOTAL Monetary Expenditures To Date

\$ 5,409.77

(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) Katherine Sofield

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

X [Signature]
Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7/1/2018 through 7/31/2018 (4) Page 1 of 7


(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, 26, 18	Mark Douglas PA 2331 NSR7 Suite 106 Ft Lauderdale, FL 33313	I	Lwyr	CHE			200.00
7							
7, 26, 18	Boulevard Prop. 53 Commerce Cntr 10557 NW 53 St Sunrise, FL 33351	B	Prop Mgt.	CHE			200.00
8							
7, 26, 18	Cheryl Levy 9520 NW 46 St Sunrise, FL 33351	I		CHE			10.00
9							
7, 26, 18	Jason & Bridget Tandlich 12103 Landing Way Cooper City, FL 33026	I		CHE			20.00
10							
7, 26, 18	Louise T Schreiner 8600 Sunrise llc #208 Sunrise, FL 33322	I		CHE			25.00
11							
7, 26, 18	Sandra Chilla 10211 NW 24 St Sunrise, FL 33322	I		CHE			25.00
12							
7, 26, 18	Dynamic Seminars & Consulting, Inc 2955 NW 126 Ave #307 Sunrise, FL 33323	B		CHE			50.00
13							

CITY CLERK
CITY OF SUNRISE
18 AUG 10 PM 12:14

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7/1/2018 through 7/31/2018 (4) Page 2 of 7

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contributor Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
7/26/18 14	Joanne H Stanley 350 N Federal Hwy Unit 1208 Boynton Beach, FL 33435	I		CHE			50.00
7/26/18 15	Jacqueline M Pugazione 5951 NW 15 Ct Sunrise, FL 33313	I		CHE			50.00
7/26/18 16	Jorjust Consulting 12717 W Sunrise Blvd #230 Sunrise, FL 33323	B		CHE			75.00
7/26/18 17	Fallenbaum CPA & Advisors LLC 10001 W Oakland Suite 203 Sunrise, FL 33351	B	Accountant	CHE			100.00
7/26/18 18	R. Scott Repinski PO Box 481018 Ft Lauderdale FL 33345	I	Accountant	CHE			100.00
7/26/18 19	V.V. Electronics Services Inc 824 NW 130 Ter Sunrise, FL 33325	B	Elect. Repair	CHE			100.00
7/26/18 20	Frank Cagan 	I	Firefighter	CHE			100.00

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7/1/2018 through 7/31/2018 (4) Page 3 of 7

(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		
7/26/18	Theodore Brill 11740 NW 11 St Plantation FL, 33323	1	Accountant	CHE			100.00
21							
7/26/18	Alexa Sepulveda 8317 Fairway Rd Sunrise, FL 33351	1	Insurance Sales	CHE			100.00
22							
7/26/18	Jessica H Offir 5200 NW 99 Ave Sunrise, FL 33351	1	Lawyer	CHE			150.00
23							
7/26/18	Metropica Lands LLC Series C 1601 Sawgrass Corporate Hwy Suite 140 Sunrise FL 33323	B	Property Mgt.	CHE			500.00
24							
7/26/18	Metropica Residential 1 LLC 1601 Sawgrass Corp Parkway # 140 Sunrise, FL 33323	B	Property Mgt.	CHE			500.00
25							
7/26/18	Matthew E Murrall P.A. 2850 N Andrews Ave Ft Lauderdale FL 33311	B	Lawyer	CHE			500.00
26							
7/26/18	Johnson Environmental Services 4700 Powerline Rd. Ft. Lauderdale FL 33309	B	Waste Hauler	CHE			500.00
27							

18 AUG 10 PM 12:17
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7/1/2018 through 7/31/2018 (4) Page 4 of 7

(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							
7, 26, 18	Republic Services of Florida 8619 Western Way Jacksonville, FL 32256	B	Waste Worker	CHE			500.00
28							
7, 26, 18	Ronald L Book 461 Coconut Palm Ter Plantation FL 33324	1	Lawyer	CHE			500.00
29							
7, 26, 18	Craven Thompson & Assoc Inc 3563 NW 53 St Ft Lauderdale FL 33309	B	Engineer	CHE			500.00
30							
7, 26, 18	Dunay, Mistel & Backman LLP 14 SE 4 Street #34 Boca Raton, FL 33432	B	Lawyer	CHE			1000.00
31							
7, 26, 18	Pioneer Estates by Luxcom LLC 8500 SW 8 St #228 Miami, FL 33144	B	Property Holdings	CHE			1000.00
32							
7, 26, 18	Venetian by Luxcom LLC 8500 SW 8 St #228 Miami, FL 33144	B	Property Holdings	CHE			1000.00
33							
7, 26, 18	Auto Vault by Luxcom LLC 8500 SW 8 St #228 Miami, FL 33144	B	Property Holdings	CHE			1000.00
34							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7 1 2018 through 7 31 2018 (4) Page 5 of 7

(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 26, 18	Partner Management Services LLC 333 S Miami Ave suite 150 Miami, FL 33301	B	Property Mgt.	CHE			1000.00
35							
7 26, 18	CHP Management Services LLC 333 S Miami Ave suite 150 Miami FL 33130	B	Property Mgt.	CHE			1000.00
36							
7 26, 18	Ronald Book PA 18851 NE 29 Ave suite 1010 Aventura, FL 33150	B	Lawyer	CHE			1000.00
37							
7 26, 18	Norona Enterprises LLC 510 shotgun Rd #400 Sunrise, FL 33326	B	Sports Club Mgt.	CHE			1000.00
38							
7 26, 18	Gabriel Norona 11900 NW 8 St Plantation FL 33325	I	Sports Club Mgt.	CHE			1000.00
39							
7 26, 18	Beverly Norona 11900 NW 8 St Plantation FL 33325	I	Sports Club Mgt.	CHE			1000.00
40							
7 26, 18	Danielle Norona 11900 NW 8 St Plantation FL 33325	I	Sports Club Mgt.	CHE			1000.00
41							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7, 1, 1, 2018 through 7, 1, 31, 2018 (4) Page 6 of 7

(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, 26, 18	NOTONAL Limited LLC 510 Shatsun Rd #400 Sunrise, FL 33326	B	Sports club Mgt.	CHE			1000.00
42							
7, 26, 18	Doumar Alsworth Lawson, Vost, Addir, Dishowitz 1177 SE 3 Ave Ft Lauderdale FL 33316	B	Lawyer	CHE			1000.00
43							
7, 26, 18	Michael Gurdin 1428 Coral Ridge Dr Ft Lauderdale FL 33316	I	Property Mgt.	CHE			1000.00
44							
7, 26, 18	Ed Morse Sawgrass Auto Mall 14601 W Sunrise Bl Sunrise, FL 33323	B	Auto Sales	CHE			1000.00
45							
7, 26, 18	Rick Case Kea 14500 W Sunrise Blvd Sunrise, FL 33323	B	Auto Sales	CHE			1000.00
46							
7, 26, 18	Diamond Cosmetics 10551 NW 53 St Sunrise, FL 33351	B	Beauty Supply	CHE			1000.00
47							
7, 26, 18	A. Z. 9463 NW 43 Ct Sunrise, FL 33351	I		CAS			10.00
48							

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 7/1/2018 through 7/31/2018 (4) Page 7 of 9

(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
7/26/18	Chris Russo [REDACTED]	/		CAS			10.00
49	[REDACTED]						
7/26/18	Jan German [REDACTED]	/		CAS			10.00
50	[REDACTED]						
7/26/18	Dan Larson [REDACTED]	/		CAS			20.00
51	[REDACTED]						
7/26/18	Norma Perez 4710 NW 113 Terr Sunrise FL 33323	/	Cabinet Maker	CAS			100.00
52							
/ /							
/ /							
/ /							
/ /							

18 AUG 10 PM 12:18
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lawrence Sotillo

(2) I.D. Number _____

(3) Cover Period 07/01/18 through 07/31/18

(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					
7/24/18	Florida Tee Shirts 5405 N. Umatas Rd #241 Sunrise 33351	T-Shirts for Volunteers	MON		646.60
2					
7/27/18	Scotto's Pizzat Pasta 3455 Umatas Road Sunrise 33351	Food for Campaign fundraiser	MON		1569.16
3					
7/27/18	Scotto's Pizzat Pasta 3455 Umatas Road Sunrise 33351	Food for Campaign fundraiser	MON		150.01
4					
11					
11					
11					
11					
11					
11					
11					

CITY CLERK
CITY OF SUNRISE
18 AUG 10 PM 12:18

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

Sunrise Fl 33313
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
18 JUL -9 PM 3:44

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commission Group D
- 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 06/01/18 To 06/30/18 Report Type: M6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0.00

Loans \$, ,

Total Monetary \$, ,

In-Kind \$, ,

(7) Expenditures This Report

Monetary Expenditures \$, 3044.00

Transfers to Office Account \$, ,

Total Monetary \$, ,

(8) Other Distributions

\$, ,

(9) TOTAL Monetary Contributions To Date

\$, 7100.00

(10) TOTAL Monetary Expenditures To Date

\$, 3044.00

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

X K Sofield
Signature

(Type name) Lawrence Sofield
 Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lawrence Sotz Id

(2) I.D. Number _____

(3) Cover Period 06/01/18 through 06/01/18

(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					
06/21/18	City of Sunrise 10770 W. Oakland Pl Blvd Sunrise, FL 33351	Quality Fee	MON		3044.00
1					
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/ /					
/ /					

18 JUL -9 PM 3:44
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Sofield
 Name
 (2) 6601 NW 27 Street
 Address (number and street)
Sunrise FL 33213
 City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

18 JUN - 1 AM 10:24

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

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group A ⁴⁵ 6-5-18

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 05/01/18 To 05/31/18 Report Type: MS

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1500.00

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ 0

Transfers to Office Account \$ _____

Total Monetary \$ _____ 0

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 7100.00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ 0

(11) Certification

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

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

(Type name) Lawrence Sofield

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

[Signature]
 Signature

(Type name) Lawrence Sofield

Candidate Chairperson (only for PC and PTY)

[Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Sofield (2) I.D. Number _____

(3) Cover Period 05/01/18 through 05/31/18 (4) Page _____ of _____

(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
5/24/18 6-5-18 L.S. 5	Sunrise General Employee Union PO Box 450581 Sunrise 33345	B	Employee UNION	CHE			500.-
5/31/18 6-5-18 L.S. 6	Metro Broward Professionals Firefighters 304 NE 1st Pompano 33060	B	Employee UNION	CHE			1000.-
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

18 JUN - 1 AM 10:24
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE
18 MAY -9 AM 9:39

(1) Lawrence A. Sofield
Name

(2) 6601 NW 27 Street
Address (number and street)

SUNRISE FL. 33313
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commission Group D
- 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 04/01/18 To 04/30/18 Report Type: MY

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 7, 000. 00

Loans \$, , .

Total Monetary \$, , .

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , . 0

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , . 0

(9) TOTAL Monetary Contributions To Date

\$, 5, 600. 00

(10) TOTAL Monetary Expenditures To Date

\$, , . 0

(11) Certification

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

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

(Type name) Katherine Sofield

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

X [Signature]

Signature

(Type name) Lawrence A. Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence A. Sotillo (2) I.D. Number _____

(3) Cover Period 04/01/18 through 04/30/18 (4) Page _____ of _____

(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		
04, 24, 18 6-5-18 LS 3	5971 Lush Sunrise, LLC 5901 NW 17 PL Sunrise 33313	B	Property Holder	CHE			1000.-
04, 24, 18 6-5-18 LS 4	2201 Lush Apts. LLC 5901 NW 17 PL Sunrise 33313	B	Property Holder	CHE			1000.-
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

18 MAY -9 AM 9:39
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence A. Sofield
Name

(2) 6601 NW 27 St
Address (number and street)

Surprise Fl. 33313
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

18 APR -9 AM 9:32

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Commission Group D

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 03101118 To 03131118 Report Type: M3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 500.

Loans \$ _____, 3,100.

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

(8) Other Distributions
\$ _____, _____, 0.

(9) TOTAL Monetary Contributions To Date
\$ _____, 3,600.

(10) TOTAL Monetary Expenditures To Date
\$ _____, _____, 0.

(11) Certification

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

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

(Type name) Katherine Sofield

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

X [Signature]
Signature

(Type name) Lawrence A. Sofield

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lawrence A. Sofield (2) I.D. Number _____

(3) Cover Period 03/01/18 through 03/31/18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
3, 29, 18 1 6.5.18	FOP Lodge 80 PO Box 480 of 6 Sunrise FL 33345	B	Employee union	CHE			500
3, 30, 18 2 6.5.18	Lawrence & Kathryn Sofield 6601 NW 27th Sunrise	I	Business owner	LOA			3100
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

18 APR - 9 AM 9:32
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lawrence Tofield (2) I.D. Number _____
 (3) Cover Period 03101108 through 03131118 (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	None				
11					
11					
11					
11					
11					
11					
11					
11					
11					

CITY CLERK
 CITY OF SUNRISE
 18 APR - 9 AM 9:32

**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

18 APR -9 AM 9:24

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)

Lawrence A. Sofield

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

6601 NW 27 St
Sunrise, FL
33313

4. Telephone

(954) 588-1932

5. E-mail address

Larry.Sofield@AOL.com

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

Commission Group 1

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

Katherine Sofield

11. Mailing Address

6601 NW 27 St. Sunrise 33313

12. Telephone

(954) 663-6602

13. City

Sunrise

14. County

Broward

15. State

FL

16. Zip Code

33313

17. E-mail address

Kathy.Sofield@AOL.com

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

19. Name of Bank

Bank of America

20. Address

8800 W. Oakland Pl. Blvd

21. City

Sunrise

22. County

Broward

23. State

FLA

24. Zip Code

33351

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

4-8-18

26. Signature of Candidate

X

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

I, Katherine Sofield, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4-8-18

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**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

18 MAR -2 AM 9:52

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)

Lawrence A. Sofield

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

6601 NW 27 Street
Sunrise, FL 33313

4. Telephone

(954) 588-1932

5. E-mail address

Larry.Sofield@AOL.com

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

Commissioner Group D

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

Kathy Sofield

11. Mailing Address

6601 NW 27 St. ~~Fla.~~

12. Telephone

(954) 663-6602

13. City

SUNRISE

14. County

Broward

15. State

FL

16. Zip Code

33313

17. E-mail address

Kathy.Sofield@AOL.com

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

19. Name of Bank

BB&T

20. Address

3401 N. Pine Island Rd.

21. City

SUNRISE

22. County

Broward

23. State

FL

24. Zip Code

33351

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

3-2-18

26. Signature of Candidate

X 

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

I, Kathy Sofield, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

3-2-18

Date

X


Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

I, Lawrence A. Sofield,


candidate for the office of Commissioner Group D;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

CITY CLERK
CITY OF SUNRISE
18 MAR -2 AM 9:52

X


Signature of Candidate

3-2-18

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

18 JUN 21 PM 3:30



NOTICE OF CANDIDACY AND AFFIDAVIT

I, Lawrence A. Sofield, do hereby affirm that I am a candidate for the office of Commissioner D, City of Sunrise, in Broward County, Florida, in the General Election to be held on November 6, 2018, 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 Commissioner.

[Signature]
Signature

6-21-18
Date

STATE OF FLORIDA
COUNTY OF BROWARD
CITY OF SUNRISE

The foregoing instrument was sworn to (or affirmed) and subscribed before me this 21st day of June, 2018, by Lawrence A. Sofield.

[Signature]
Notary Public

(seal)

Personally Known [Signature] OR Produced Identification _____
Type of Identification Produced _____



FELICIA M BRAVO
MY COMMISSION # GG 048087
EXPIRES: February 11, 2021
Bonded Thru Budgetary Notary Services

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**

(Do not use this form if a Judicial or School Board Candidate)

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

**CITY CLERK
CITY OF SUNRISE**

18 JUN 21 PM 3: 15

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Lawrence "Larry" Sofield

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of Commission, CS
(Office) (District #)

1 ; I am a qualified elector of Broward County, Florida;
(Circuit #) (Group or Seat #)

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

Candidate's Florida Voter Registration Number (located on your voter information card): 101400956

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]

LAHR - uhns LER - ee so - feeld

X [Signature] 1954 588-1932 Larry Sofield @ AOL.com
Signature of Candidate Telephone Number Email Address

6601 NW 27 Street Sunrise FL 33313
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Broward

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

Sworn to (or affirmed) and subscribed before me this 21st
day of June, 2018.

Personally Known: X or Produced Identification: _____

Type of Identification Produced: _____



FELICIA M BRAVO
MY COMMISSION # GG 048087
EXPIRES: February 11, 2021
Bonded Thru Budget Notary Services

FORM 1

**STATEMENT OF
FINANCIAL INTERESTS**

2017

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

FOR OFFICE USE ONLY:

LAST NAME - FIRST NAME - MIDDLE NAME :

Sofield Lawrence A.

MAILING ADDRESS :

6601 NW 27 Street

Sunrise 33312 Broward

CITY :

ZIP :

COUNTY :

NAME OF AGENCY :

City of Sunrise

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Commission Group 1).

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

CITY CLERK
CITY OF SUNRISE
18 JUN 21 PM 3:15

****** 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, 2017 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
Real Post Inc	16295 NW 53 St. 33351	Service
Real Signs Inc	10293 NW 53 St 33351	Manufacturing
Keys Post Inc.	10295 NW 53 St 33351	Service
Relmax Interaction	7801 W. Comm'l Blvd 33351	Real Estate Sales

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

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

NAME OF CREDITOR	ADDRESS OF CREDITOR
Quicken Loans	1056 Woodward Ave Detroit, MI 48226

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
ADDRESS OF BUSINESS ENTITY		
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

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:



Date Signed:

6-16-18

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:

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

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.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

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

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

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, 2017.

CITY CLERK
CITY OF SUNRISE

18 JUN 21 PM 3:15



NOTICE OF LOGIC AND ACCURACY TEST

F.S. 101.5612 Testing of tabulating equipment.

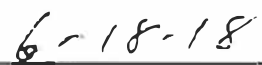
Notice is hereby given that the pre-election Logic and Accuracy test for the automatic tabulating equipment for the 2018 Primary and General Elections will take place as listed below. ***Attendance at this test of the equipment is strictly optional.*** You are welcome to observe.

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

For Primary Election	Wednesday, August 8, 2018	10:00 a.m.
For General Election	Wednesday, October 17, 2018	10:00 a.m.



Signature of Candidate



Date

CITY CLERK
CITY OF SUNRISE

18 JUN 21 PM 3:15



**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.

Lawrence A. Sofield
Print Name


Signature

6-18-18
Date