

# WAIVER OF REPORT

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

(PLEASE TYPE)

05-06-16A08:53 RCVD

OFFICE USE ONLY

DAVID SINGER  
Name

Councilman District 2  
Office Sought

8360 SW 154 Ter  
Address

Palmetto Bay FL 33157  
City State Zip Code

- Candidate       Political Committee       Party Executive Committee

NOTE: This form does not apply to an electioneering communications organization (ECO). An ECO must file a report (not a waiver) that no reportable contributions or expenditures were made during the reporting period (s. 106.0703(6), F.S.).

- Check here if address has changed since last report.       Check here if PC 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 04

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

X 4/1/16 THROUGH 4/30/16  
X [Signature] 5/6/16  
Signature Date  
X [Signature] 5/6/16  
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.)
  - Party Executive Committees:  
Treasurer and Chairman (s. 106.29(2), F.S.)

Except as noted above for an ECO, 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.

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

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

05-06-16A08:52 RCVD

(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)

David Singer

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

8360 SW 154 Terrace  
Palmetto Bay, FL 33157

**4. Telephone**

(305 ) 235-5191

**5. E-mail address**

dmsinger@bellsouth.net

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

Palmetto Bay, District 2

**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**

David Singer

**11. Mailing Address**

8360 SW 154 Terrace

**12. Telephone**

( 305 ) 235-5191

**13. City**

Palmetto Bay

**14. County**

Miami-Dade

**15. State**

FL

**16. Zip Code**

33157

**17. E-mail address**

dmsinger@bellsouth.net

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

**19. Name of Bank**

Wells Fargo

**20. Address**

2665 S. Bayshore Drive

**21. City**

Coconut Grove

**22. County**

Miami-Dade

**23. State**

FL

**24. Zip Code**

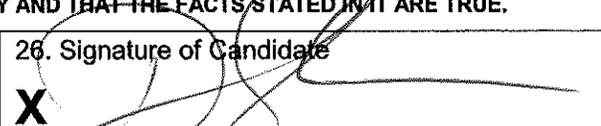
33133

**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**

5/6/2016

**26. Signature of Candidate**

**X** 

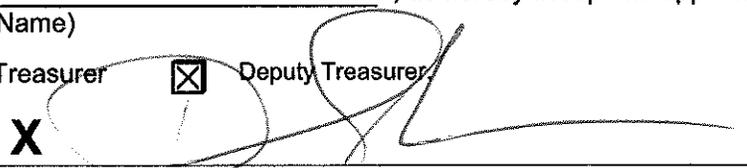
**27. Treasurer's Acceptance of Appointment** (fill in the blanks and check the appropriate block)

I, David Singer, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer

5/6/2016

Date

**X** 

Signature of Campaign Treasurer or Deputy Treasurer

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Singer

Name

(2) 8360 SW 154 terr

Address (number and street)

Miami, Fl 33157

City, State, Zip Code

Check here if address has changed

(3) ID Number: \_\_\_\_\_

OFFICE USE ONLY

(4) Check appropriate box(es):

Candidate Office Sought: Council Seat 2

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 / 2016 To 03 / 31 / 2017 Report Type: \_\_\_\_\_

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , 500 . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 500 . 00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 24 . 57

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 24 . 57

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 500 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 24 . 57

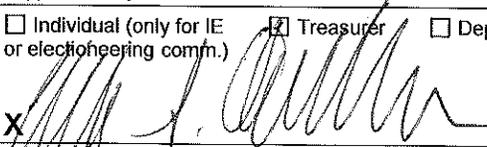
### (11) Certification

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:

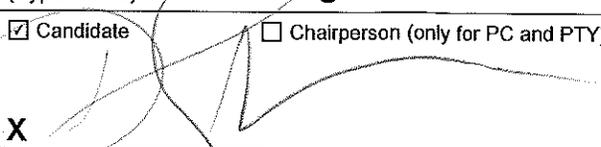
(Type name) Mark Auerbacher

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

  
Signature

(Type name) David Singer

Candidate  Chairperson (only for PC and PTY)

  
Signature

# CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name David Singer (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) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
03 / 22 / 16	David Singer 8360 SW 154 Terr Village of Palmetto Bay, FL 33157	S	CPA	LOA			500.00
/ /							
/ /							
/ /							
/ /							
/ /							
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**APPOINTMENT OF CAMPAIGN TREASURER  
AND DESIGNATION OF CAMPAIGN  
DEPOSITORY FOR CANDIDATES**

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

(PLEASE PRINT OR TYPE)

03-21-16P02:47 RCVD

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)

DAVID SINGER

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

8360 SW 154 TER  
Palmello Bay, FL 33157

4. Telephone

(805) 235-5191

5. E-mail address

dsinger@bellsouth.net

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

Palmello Bay District 2

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

Mark S. Auerbacher

11. Mailing Address

16824 SW 80th CT

12. Telephone

(805) 232-5236

13. City

Palmello Bay

14. County

Miami-Dade

15. State

FL

16. Zip Code

33157

17. E-mail address

Mark.Auerbacher.BIPC.com

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

19. Name of Bank

Wells Fargo

20. Address

2665 S. Bayshore Dr. CoCoNut Grove FL

21. City

CoCoNut Grove

22. County

Miami Dade

23. State

FL

24. Zip Code

33133

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

3/21/16

26. Signature of Candidate



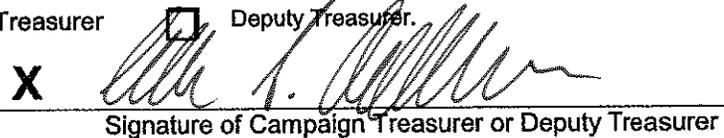
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Mark S. Auerbacher, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:

Campaign Treasurer     Deputy Treasurer.

3/16/16  
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.)

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03-21-16P02:47 RCVD

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**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)

DAVID M SINGAR

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

8360 SW 154 TRAIL VILLAGE OF PALMETTO BAY, FL 33157

**4. Telephone**

(705) 235-5691

**5. E-mail address**

Dmsingar@bellsouth.net

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

Palmetto Bay District 2

**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**

KARL E. STURGE

**11. Mailing Address**

8300 SW 164 TR

**12. Telephone**

(305) 742-8357

**13. City**

PALMETTO BAY

**14. County**

MIAMI-DADE

**15. State**

FL

**16. Zip Code**

33157

**17. E-mail address**

KARLS1340@BELLSOUTH.NET

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

**19. Name of Bank**

Wells Fargo

**20. Address**

2665 S. Bayshore Dr

**21. City**

Coconut Grove

**22. County**

Miami-Dade

**23. State**

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**24. Zip Code**

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**25. Date**

3/21/16

**26. Signature of Candidate**

X

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

I, KARL E. STURGE, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:     Campaign Treasurer     Deputy Treasurer.

3/20/16  
Date

X   
Signature of Campaign Treasurer or Deputy Treasurer