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CONTRIBUTIONS RETURNED

(Section 106.07(4)(b), F.S.)

(PLEASE TYPE)

This report applies only to contributions received by any candidate or committee, but returned to the contributor before being deposited in the campaign account.

Candidate Political Committee Committee of Continuous Existence

Full Name: JAY R CHERNOFF

Full Address: 19001 NE 20 Court, North Miami Beach FL 33179

Full Name and Address of Contributor:

MICHAEL J SNYDER
4000 Hollywood Blvd. Suite 455S
Hollywood, FL 33021

Amount of Contribution: \$ 250.00

Date Received: 3/21/05

Date Returned: 3/28/05

Full Name and Address of Contributor:

KIM ANDREA LAMPLOUGH CPA. P.A.
750 NW 135th Way
Plantation FL 33325

Amount of Contribution: \$ 300.00

Date Received: 3/23/05

Date Returned: 3/28/05

Full Name and Address of Contributor:

Amount of Contribution: \$ _____

Date Received: _____

Date Returned: _____

Full Name and Address of Contributor:

Amount of Contribution: \$ _____

Date Received: _____

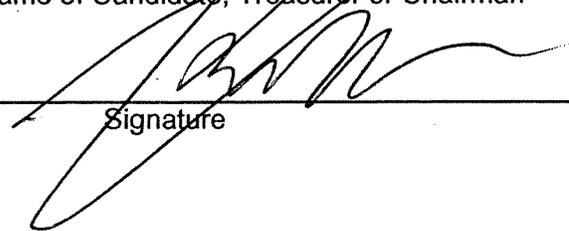
Date Returned: _____

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND IT IS TRUE, CORRECT AND COMPLETE.

JAY R CHERNOFF

Type or Print Name of Candidate, Treasurer or Chairman

X



Signature

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Jay R. Chernoff
Name
(2) 19001 NE 20 Court
Address (number and street)
North Miami Beach, FL 33179
City, State, Zip Code

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CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Councilman

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 2 / 16 / 05 To 06 / 14 / 05 Report Type TR

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 500.00

Loans \$ 1018.00

Total Monetary \$ 1518.00

In-Kind \$

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1518.00

Transfers to Office Account \$

Total Monetary \$ 1518.00

(8) Other Distributions \$

(9) TOTAL Monetary Contributions To Date
\$ 1518.00

(10) TOTAL Monetary Expenditures To Date
\$ 1518.00

(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) ROBIN BEUL-CHERNOFF

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X
Signature [Signature]

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

(Type name) JAY R CHERNOFF

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

X
Signature [Signature]

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Jay R. Chernoff (2) I.D. Number _____

(3) Cover Period 02 / 16 / 05 through 6 / 14 / 05 (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		
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Jay R. Chernoff (2) I.D. Number _____

(3) Cover Period 02 / 16 / 05 through 06 / 14 / 05 (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																																																	
3/1 /05	City National Bank 3875 NE 191 Street Aventura FL 33180	Charge for Checks	MON	ADD	6.99																																												
5						6/14/05	Wildlife Care Center 3200 SW 4 Avenue Ft. Lauderdale, FL 33315	Donation	DIS	DEL	6.99 (Total Donation \$168.01)	4	///						///						///						///						///						///						///
6/14/05	Wildlife Care Center 3200 SW 4 Avenue Ft. Lauderdale, FL 33315	Donation	DIS	DEL	6.99 (Total Donation \$168.01)																																												
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Jay R. CHERNOFF
Name

(2) 19001 N.E. 20 Court
Address (number and street)

D.M. BCHA FL 33179
City, State, Zip Code

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CLERK'S OFFICE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): COUNCILMAN

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 2 / 16 / 05 To 6 / 14 / 05 Report Type TR

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In-Kind \$ _____

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Transfers to Office Account \$ _____

Total Monetary \$ 1518.00

(8) Other Distributions
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(9) TOTAL Monetary Contributions To Date
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(10) TOTAL Monetary Expenditures To Date
\$ 1518.00

(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) Robin Beck Chernoff
 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) Jay R. CHERNOFF
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X
Signature

INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Type full name of candidate, political committee, committee of continuous existence, party executive committee, or individual or organization filing an electioneering communication report.																					
(2) Type the address (include city, state, and zip code). You may use a post office box. If the address has changed since the last report filed, check the appropriate box.																					
(3) Type identification number assigned by the Division of Elections.																					
(4) Check one of the appropriate boxes: Candidate (type office sought - include district, circuit, or group numbers) Political Committee Committee of Continuous Existence Party Executive Committee Electioneering Communication If PC or CCE has disbanded and will no longer file reports, check appropriate box. If individual or organization will no longer file electioneering communication reports, check appropriate box.																					
(5) Type the cover period dates (e.g., From <u>07/01/03</u> To <u>09/30/03</u>) Enter the report type using one of the following abbreviations (see <i>Calendar of Election and Reporting Dates</i>). If report is for a special election , add "S" in front of the report code (e.g., SG3).																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; border-bottom: 1px solid black;">Quarterly Reports</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td>January Quarterly.....</td> <td style="text-align: right;">Q4</td> </tr> <tr> <td>April Quarterly.....</td> <td style="text-align: right;">Q1</td> </tr> <tr> <td>July Quarterly.....</td> <td style="text-align: right;">Q2</td> </tr> <tr> <td>October Quarterly.....</td> <td style="text-align: right;">Q3</td> </tr> </tbody> </table>	Quarterly Reports		January Quarterly.....	Q4	April Quarterly.....	Q1	July Quarterly.....	Q2	October Quarterly.....	Q3	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; border-bottom: 1px solid black;">General Election Reports</th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td>46th Day Prior.....</td> <td style="text-align: right;">G1</td> </tr> <tr> <td>32nd Day Prior.....</td> <td style="text-align: right;">G2</td> </tr> <tr> <td>18th Day Prior.....</td> <td style="text-align: right;">G3</td> </tr> <tr> <td>4th Day Prior.....</td> <td style="text-align: right;">G4</td> </tr> </tbody> </table>	General Election Reports		46 th Day Prior.....	G1	32 nd Day Prior.....	G2	18 th Day Prior.....	G3	4 th Day Prior.....	G4
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18 th Day Prior.....	F2																				
4 th Day Prior.....	F3																				
90-Day Termination Reports (Candidates Only)																					
Termination Report.....	TR																				
Check one of the appropriate boxes: Original (first report filed for this reporting period) Amendment (an amendment to a previously filed report) Special Election Report Independent Expenditure Report (see Section 106.071, F.S.)																					
(6) Type the amount of all contributions this report: Cash & Checks Loans Total Monetary (sum of Cash & Checks and Loans) In-kind (a fair market value must be placed on the contribution at the time it is given)																					
(7) Type the amount of all expenditures this report: Monetary Expenditures Transfers to Office Account (elected candidates only) Total Monetary (sum of Monetary Expenditures and Transfers to Office Account)																					
(8) Type the amount of other distributions (goods & services contributed to a candidate or other committee by a PC, CCE or PTY).																					
(9) Type the amount of TOTAL monetary contributions to date (parties keep cumulative totals for 2 year periods at a time (e.g., 01/01/02 – 12/31/03). Candidates keep cumulative totals from the time the campaign depository is opened through the termination report).																					
(10) Type the amount of TOTAL monetary expenditures to date (parties keep cumulative totals for 2 year periods at a time (e.g., 01/01/02 – 12/31/03). Candidates keep cumulative totals from the time the campaign depository is opened through the termination report).																					
(11) Type or print the required officer's name and have them sign the report: Candidate report (treasurer & candidate must sign) PC report (treasurer & chairperson must sign) CCE report (treasurer must sign) PTY report (treasurer & chairperson must sign) Electioneering Communication report (individual or organization's treasurer & chairperson must sign)																					
AMENDMENT REPORTS: An amendment report summary should summarize only contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94. The Division will summarize all reports submitted for each reporting period and for the filer to date.																					

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JAY R CHERNOFF (2) I.D. Number _____

(3) Cover Period 2 / 16 / 05 through 6 / 14 / 05 (4) Page 2 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		Amount
2 / 16 / 05 1	JAY R CHERNOFF 19001 N.E. 20th N. Miami Beach FL 33179	1	REALTOR	LOA			1018
3 / 17 / 05 2	ALAN ROSENTHAL 2875 NE 191st Aventura FL 33180	B	ATTORNEY	CHE			500
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Jay R CHERNOFF (2) I.D. Number _____
 (3) Cover Period 2/16/05 through 6/14/05 (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					
3/21/05	City of N.M. BCH 17011 NE 19 AVE N.M. BCH FL 33162	Filing Fee	DIS		150.00
1					
6/14/05	JAY R CHERNOFF 19001 N.E. 20th N.M. BCH FL 33179	REPAYMENT OF LOAN REF	REF		1018.00
2					
6/14/05	WILD LIFE CARE CENTER 3200 S.W. 4th AVE FORT LAUDERDALE FL 33315	Donation	DIS		175.00
3					
6/14/05	SPECIAL OLYMPICS 19436 N.E. 26 AVE Suite 84 N.M. BCH 33180	Donation	DIS		175.00
4					
///					
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