



Miami-Dade Commission on Ethics & Public Trust

Report of Investigation

Investigator: Sylvia Batista

Case No.: K14-040	Case Name: NBV gifts	Date Opened:	Date Closed:
Complainant(s): Commissioner Richard Chervony,	Subject(s): Mayor Connie Leon Kreps, Vice Mayor Eddie Lim, Commissioner Wendy Duvall and Commissioner Jorge Gonzalez	04/18/14	

Allegation(s):

On April 17, 2014, the COE received a letter from Commissioner Richard Chervony (Chervony) of North Bay Village (NBV). The letter informed that Mayor Connie Leon Kreps (Kreps), Vice Mayor Eddie Lim (Lim), and Commissioner Jorge Gonzalez (Gonzalez) have failed to report in their respective quarterly gift disclosures (Form 9) some of the gifts that they received within the prescribed period of time. Furthermore, Chervony alleged that Commissioner Wendy Duvall (Duvall) has never submitted a Form 9 despite having received reportable gifts during three separate calendar quarters.

Relevant Law:

Miami-Dade Conflict of Interest and Code of Ethics Ordinance Section 2-11.1(e) *Gifts*
“(1) *Definition.* The term “*gift*” shall refer to the transfer of anything of economic value, whether in the form of money, service, loan, travel, entertainment, hospital, item or promise or in any other form, without adequate and lawful consideration.
(2) *Exceptions.* The provisions of Subsection (e)(1) shall not apply to:
(c) Awards for professional or civil achievement.
(4) *Disclosure.* Any person included in the term defined in Subsection (b)(1) through (6) shall

disclose as provided herein any gift, or series of gifts from any one person or entity, having a value in excess of one hundred dollars (\$100.00). Said disclosure shall be made by filing a copy of the disclosure form required by Chapter 112, Florida Statutes, for "local officers" with the Clerk of the Board of County Commissioners..."

North Bay Village Code of Ordinances, Section 38.05 Gifts.

"(A) Definition. The term "gift" shall refer to the transfer of anything of economic value, whether in the form of money, service, loan, travel, entertainment, hospitality, item or promise, or in any other form, without adequate and lawful consideration.

Exceptions. The definition of the term "gift" of subsection 38.05(A) shall not apply to:

(3) Awards for professional or civic achievement.

(D) *Disclosure.* Any person included in the term defined in subsection 38.02(A) through (F) shall disclose any gift, or series of gifts, received from any one person or entity during the Village's fiscal year, having a value in excess of \$25.00. The disclosure shall be made by filing a copy of the disclosure form required by F.S. Chapter 112 for "local officers" with the Village Clerk simultaneously with the filing of the form with the Clerk of Miami-Dade County..."

Document/Audio/Video Review:

Review of the FY 2013 NBV Travel Budget for the Mayor and Commission.

Review of the NBV Travel Budget for the Mayor and Commission as of 03/27/14.

Form 9s filed for the quarter ending in December 2012.

Form 9s filed for the quarter ending in September 2013.

Form 9s filed for the quarter ending in December 2013.

06/04/14 – review of the following documents produced by NBV Clerk, Yvonne Hamilton, in connection with the MDCLC 60th Annual Gala event (the Event):

- 12/03/13 – e-mail from Village Manager, Frank Rollason (Rollason) to Mayor and Commissioners regarding the alternative ways to locate the money to fund a table and half page ad for the event.
- 12/03/13 – e-mail from Chervony to Rollason saying that the \$500 ad should come from all 5 Commissioners, and that he is willing to take \$100 from his travel expense for it. Chervony questioned the need for a table of ten after removing him and a guest from the list.
- 12/03/13 – e-mail from Rollason to Chervony advising that they have located funding for the full table and the half page ad without taking money from the Commission's travel accounts.
- 12/03/13 – e-mail from Chervony to Rollason asking why they need funding for a full table when he and Wendy (Duvall) are not going.
- 12/03/13 – e-mail from Rollason to Chervony advising that the table will have ten

guests as is normally done, but without staff attending. Representative David Richardson (Richardson) and a guest may be invited to take Chervony's two seats and he is still waiting to hear from Duvall.

- 12/03/13 – e-mail from Chervony to Rollason asking where they are obtaining the \$2000.00 from.
- 12/03/13 – e-mail from Rollason to Chervony advising that the funding is coming from (1) surplus dollars available from the budget account to purchase the annual \$50 gift cards for employees, and (2) from the Manager's travel account because he is not taking any trips this fiscal year.
- 12/03/13 – check request to Finance from the Commission requesting check in the sum of \$2,000.00 payable to MDCLC for the event.
- 12/17/13 – e-mailed invitation to the event from the MDCLC.
- 12/17/13 – MDCLC Invoice to NBV in the amount of \$2,000.00 for 1 table of ten and a ½ page black and white ad.
- 12/30/13 – e-mail from Tes Cutino (Cutino), Assistant to Village Manager, to Kreps requesting information as to the guest she plans on bringing to the event.
- 12/30/13 – e-mail from Kreps advising Cutino that she invited Richardson and that his attendance, and any guest, needs to be verified.
- 12/31/13 – e-mail from Rollason to Kreps advising that Richardson and guest are confirmed and will take the two open seats declined by Chervony.
- 01/07/14 – e-mail from Kreps to Cutino advising that County Commissioner Sally Heyman is attending but is not sitting at the NBV table.
- 01/07/14 – e-mail following up on previous request for the names of the guests who will be brought to the event.
- 01/17/14 – e-mail from Robert Switkes (Switkes), Esq., Interim Village Attorney advising Rollason that if a Commissioner or administrator brings a spouse to the event it would be prudent for them to file a gift disclosure.
- 01/22/14 – e-mail from Rollason to all Commisisoners attaching a copy of Switkes' opinion regarding whether tickets being provided by NBV to the event need to be included in their quarterly gift reports.
- 01/22/14 – e-mail from Cutino to Gonzalez advising him the cost per person for the event is \$165.00.
- 01/23/14 – e-mail from Richard Kuper, Esq., Executive Director of MDCLC, notifying that there are only 2 days left to RSVP for the event.
- 01/23/14 – e-mail from Gonzalez to Cutino asking whether he is registered for the event.
- 01/27/14 – e-mail from Cutino to the Mayor and Commissioners asking for the names of each of their guests.
- 01/29/14 – e-mail from Lim advising that his guest will be Melanie Bergero (Bergero).
- 01/29/14 – e-mail from Duvall advising that her guest at the event will be her husband, Mariano Beltrame.
- 02/05/14 – e-mail from Lim advising that his guest, Bergero, is unable to attend the event, and asks whether NBV can still get a credit or whether they can sell the seat to another person.
- 02/06/14 – e-mail from Cutino to Lim advising that the table for the event is paid for, but not out of individual travel expense. For this reason, Cutino advises that it would

- be better if he finds another guest.
- 02/07/14 – e-mail from Lim to Cutino advising that his new guest is Sofia Emuriel.

Investigation:

Interviews/Contacts

Kreps, Duvall, Lim and Gonzalez - 05/27/14 – 6/3/14

Telephone contact was made with Kreps, Duvall, Lim and Gonzalez to discuss the information provided by Chervony.

Kreps said that she did not know that bringing a guest to any of the MDCLC events was a reportable gift. Kreps advised that her guest was a NBV employee and asked whether she would still have to report bringing her as a guest. Kreps was told that if the employee is required to file gift disclosures, she would have to report the ticket to the event as a gift.

Kreps confirmed that she received a ceremonial shovel and hard hat at a groundbreaking ceremony which she keeps in her office at City Hall, and also received a gift basket from a neighbor during the holidays. Kreps said that it would appear that Chervony is on a mission to discredit the rest of the Commission with petty allegations which are a waste of time and not the right way to approach differences with fellow members of the Commission.

Kreps agreed to meet, but the COE was subsequently contacted by Alfonso Perez (Perez), Esq. who advised that he is representing Kreps on the subject matter. A copy of the letter from Chervony with attachments was delivered to Perez by e-mail. Perez advised that he would contact the COE to schedule Kreps' interview.

Duvall was advised of the allegations made against her. Duvall said that she did not attend the MDCLC 60th Annual Gala. Duvall made an appointment to give her statement and said she would be coming in with the Village Attorney. Duvall subsequently cancelled the appointment and retained Perez to represent her.

Lim was advised of the allegations made. Lim questioned the motivation of the letter. Lim said that the entire table for ten was paid for by NBV and he felt that there was no "gift" to him if he brought someone. Lim agreed to come in for an interview upon further notice.

Gonzalez advised that NBV pays a membership fee to be a member of the MDCLC, and thus they are invited to all MDCLC events. When he attends any MDCLC event, he does so in his capacity as a NBV elected official and is performing his official duties. Going to these events is good for NBV. It is a way of networking and sharing best practices with officials from other municipalities. Neither he nor his wife personally benefit from going to these events.

Members of the Commission, including the Mayor, are told of the upcoming events by the City Manager. The City Manager sends them the invitations and asks whether they will be going alone or with a guest. Gonzalez said that he chooses to bring his wife, and the amount

for her place is added to his travel budget. There is never a notification of the additional costs, or any mention that bringing your spouse as a guest would be counted as a gift.

Gonzalez had much to say about fellow Commissioner Chervony and his constant attempts at discrediting the others on the Commission. He believes it is obvious that such petty allegations are motivated by his desire to negatively impact the chances for reelection of the others. Gonzalez said he has no problem reporting the amounts expended by the Village on his guest, but hopes that the COE does not allow itself to be used by Chervony in his political agenda.

06/24/14 – NBV City Manager, Frank Rollason (Rollason)

Rollason was contacted via e-mail to provide further information on how attendance at each event was paid for. The information he provided is detailed in the chart above.

06/05/14 – Sissy Shute; 1353 Bay Terrace, NBV –

Sissy Shute (Shute) was contacted and asked about a gift basket that she gave to Kreps last December. Shute said that last December she went to the Costco located at 144th Street and Biscayne Boulevard and bought a number of food baskets for some of her neighbors. The baskets cost \$20 each, but she does not have the receipt. Kreps is a neighbor and they have become acquainted mostly because she is active in the community.

Shute said she does not understand Chervony's motives in going after Kreps and the others. Shute explained that in the years that she has been a resident of NBV, she has seen mayors come and go, but this particular mayor is very caring and kind. Shute said that she had heard about Chervony's letter and has heard that Chervony is trying to run somebody against Kreps. Shute said that Chervony is not a loyal member of the NBV Commission. Shute said that she sees a great deal of jealousy and sex discrimination in Chervony's actions.

Shute said that she was surprised by Chervony since he recently sent her an e-mail notifying her of a meeting that was of interest to her. Shute said she thanked him, but then he did this.

Shute said that Kreps was a nurse and nurses are compassionate and caring. These qualities are evident in her performance as a female leader. Sometimes female leaders get under the skin of males who are sexist in their views. She believes that is what is motivating Chervony.

Opinions interpreting gift disclosure:

In CEO 06-27, the Florida Commission on Ethics opined that a City's payment of travel for a City official's spouse or guest is an indirect and reportable gift to City officials on their quarterly gift disclosure form, even if such expenditure was approved by the City Commission.

In INQ 14-078, the Executive Director of Miami-Dade Commission on Ethics advised Chervony that a paid ticket for the spouse of an elected official should be disclosed by the elected official as a gift to the elected official.

Items received:

Mayor Connie Leon Kreps:

DATE	DESCRIPTION	AMOUNT
2/9/13	Guest attending the 59th Annual Gala Dinner for M-D County League of Cities - City paid \$1,500 for table. Cost of guest's attendance must be reported by Mayor Kreps. Gift disclosure form was due June 30, 2013.	\$ 214.29
3/6/14	Guest attending the Board of Director meeting of M-D League of Cities. Guest is a City employee, attending in his/her official capacity and therefore does not need to report the item as a gift.	\$ 40.00
2/8/14	Guest attending the 60 th Annual Gala Dinner of the M-D County League of Cities. – City paid \$1,500 for table + \$500 for ½-page ad. Cost of guest's attendance must be reported by Mayor Kreps. Gift disclosure form was due June 30, 2014.	\$150.00
12/10/13	Ceremonial shovel and hard hat received at groundbreaking ceremony at BLU. Gift exception under Miami-Dade Code and NBV Code.	\$ 125.00
Week of 12/9/13	Gift basket from Sissy Shute, resident of 1353 Bay Terrace. Under reportable gift threshold amount in both Miami-Dade Code and NBV Code.	\$ 20.00

Vice-Mayor Eddie Lim:

DATE	DESCRIPTION	AMOUNT
2/8/14	Guest attending the 60th Annual Gala Dinner of the M-D County League of Cities - City paid \$1,500 for table + \$500 for ½-page ad. Cost of guest's attendance must be reported by Vice-Mayor Lim. Gift disclosure form was due June 30, 2014.	\$150.00
12/10/13	Ceremonial shovel and hard hat received at groundbreaking ceremony at BLU. Gift exception under Miami-Dade Code and NBV Code.	\$ 125.00

Commissioner Wendy Duvall:

DATE	DESCRIPTION	AMOUNT
12/6/12	Guest attending the Board of Directors' meeting of the M-D League of Cities. Cost of guest's attendance must be reported by Commissioner Duvall under NBV Code. Gift disclosure form was due March 31, 2013.	\$ 40.00
2/9/13	Guest attending the 59th Annual Gala Dinner of the M-D County League of Cities - City paid \$1,500 for table. Cost of guest's attendance must be reported by Commissioner Duvall. Gift disclosure form was due June 30, 2013.	\$ 214.29
2/8/14	Guest attending the 60th Annual Gala Dinner of the M-D County League of Cities - City paid \$1,500 for table + \$500 for ½-page ad.	Neither Duvall nor guest attended.
3/6/14	Guest attending the Board of Directors meeting of the M-D League of Cities. Cost of guest's attendance must be reported by Commissioner Duvall. Gift disclosure form was due June 30, 2014.	\$ 40.00

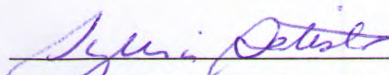
Commissioner Jorge Gonzalez:

DATE	DESCRIPTION	AMOUNT
12/6/12	Guest attending the Board of Directors' meeting of the M-D League of Cities. Cost of guest's attendance must be reported by Commissioner Gonzalez under NBV Code. Gift disclosure form was due March 31, 2013.	\$ 40.00
2/9/13	Guest attending the 59th Annual Gala Dinner of the M-D County League of Cities - City paid \$1,500 for table. Cost of guest's attendance must be reported by Commissioner Gonzalez. Gift disclosure form was due June 30, 2013.	\$ 214.29
9/12/13	Board of Directors meeting of the M-D County League of Cities.	Gonzalez did not attend.
12/5/13	Guest attending the Board of Directors meeting of the M-D County League of Cities. Cost of guest's attendance must be reported by Commissioner Gonzalez under NBV Code. Gift disclosure form was due March 31, 2014.	\$ 40.00

2/8/14	Guest attending the 60th Annual Gala Dinner of the M-D County League of Cities - City paid \$1,500 for table + \$500 for ½-page ad. Cost of guest's attendance must be reported by Commissioner Gonzalez. Gift disclosure form was due June 30, 2014.	\$ 150.00	
3/6/14	Guest attending the Board of Directors meeting of the M-D County League of Cities. Cost of guest's attendance must be reported by Commissioner Gonzalez under NBV Code. Gift disclosure form was due June 30, 2014.	\$ 40.00	
12/10/13	Ceremonial shovel and hard hat received at groundbreaking ceremony at BLU. Gift exception under Miami-Dade Code and NBV Code.	\$ 125.00	

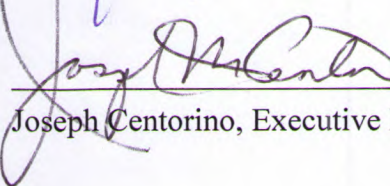
Conclusion(s):

Investigation revealed that all events in question were paid for by the NBV; these expenses were part of the budget, approved by the Commission and processed through the City Manager. Also, the question of whether a guest's ticket must be reported by an elected official is one that has led to confusion in the past. Further, all elected officials named in this report have now complied with the reporting requirement. (Composite Exhibit A) For all of these reasons, it is not a prudent use of Ethics Commission resources to file complaints against these individuals.


Sylvia Batista, COE Investigator

Approved by:


Miriam S. Ramos, Deputy General Counsel


Joseph Centorino, Executive Director


Date

COMPOSITE
EXHIBIT A

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Leon-Kreps Connie			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7530 Center Bay Drive			OFFICE OR POSITION HELD: Mayor	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 2013	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
February 9, 2013	Miami-Dade League of Cities 59th Installation Gala	\$214.29	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

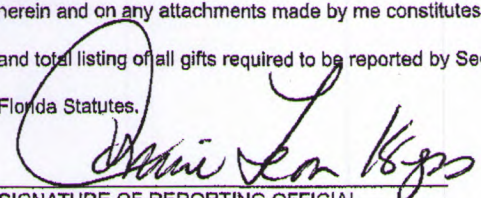
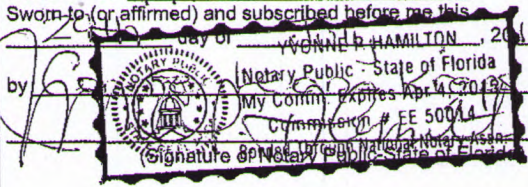
☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

<p>I, the person whose name appears at the beginning of this form, do depone on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.</p> <p> SIGNATURE OF REPORTING OFFICIAL</p>	<p>STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>20</u> day of <u>February</u>, 20<u>13</u> by <u>Connie Leon-Kreps</u>  (Signature of Notary Public - State of Florida) (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <u> </u> OR Produced Identification <u> </u> Type of Identification Produced <u> </u></p>
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PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Leon-Kreps Connie			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7530 Center Bay Drive			OFFICE OR POSITION HELD: Mayor	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 2014	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
February 8, 2014	Miami-Dade League of Cities 60th Installation Gala	\$150.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

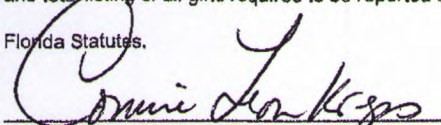
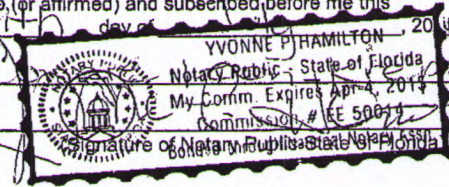
☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depone on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.  SIGNATURE OF REPORTING OFFICIAL	STATE OF FLORIDA COUNTY OF <u>Miami Dade</u> Sworn to, (or affirmed) and subscribed before me this <u>8th</u> day of <u>February</u> , 20 <u>14</u> by <u>Connie Leon-Kreps</u>  Signature of Notary Public, State of Florida (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <u>Yes</u> OR Produced Identification Type of Identification Produced _____
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PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Lim Eddie			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7921 East Drive, #6			OFFICE OR POSITION HELD: Vice Mayor	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 20 <u>14</u>	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
February 8, 2014	Miami-Dade League of Cities 60th Installation Gala	\$150.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

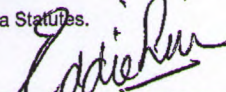
PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

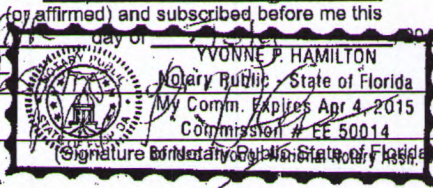
If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.


SIGNATURE OF REPORTING OFFICIAL

STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20 <u>14</u> by <u>YVONNE P. HAMILTON</u>  (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)

LAST NAME -- FIRST NAME -- MIDDLE NAME: Duvall Wendy			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7545 E. Treasure Drive, #4H			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input checked="" type="checkbox"/> DECEMBER	
			YEAR 20 <u>12</u>	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. **You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.**

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
December 6, 2012	Miami-Dade County League of Cities Dinner	\$40.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

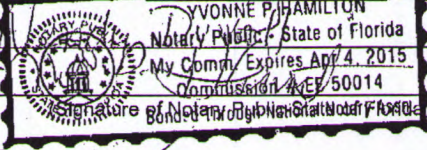
☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do
depose on oath or affirmation and say that the information disclosed
herein and on any attachments made by me constitutes a true accurate,
and total listing of all gifts required to be reported by Section 112.3148,
Florida Statutes.

Florida Statutes.

Wendy Duvall
SIGNATURE OF REPORTING OFFICIAL

STATE OF FLORIDA
COUNTY OF Miami-Dade
Sworn to (or affirmed) and subscribed before me this
28th day of March, 2014
by [Signature]

[Signature]
Bonded by Diana Stalder Notary Public

(Print, Type, or Stamp Commissioned Name of Notary Public)
Personally Known _____ OR Produced Identification
Type of Identification Produced _____

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Duvall Wendy			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7545 E. Treasure Drive, #4H			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 2013	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
February 9, 2013	Miami-Dade League of Cities 59th Installation Gala	\$214.29	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

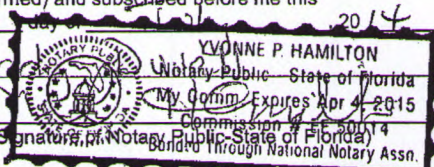
If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.

Wendy Duvall
SIGNATURE OF REPORTING OFFICIAL

STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>22nd</u> day of <u>February</u> , 2014 by <u>Wendy Duvall</u>  (Signature of Notary Public, State of Florida) (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <input type="checkbox"/> OR Produced Identification <input type="checkbox"/> Type of Identification Produced _____

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Duvall Wendy			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7545 E. Treasure Drive, #4H			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 2014	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
March 6, 2014	Miami-Dade League of Cities Dinner	\$40.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

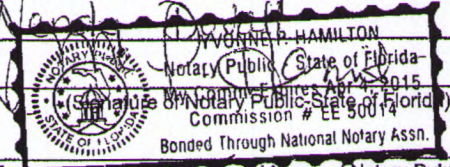
☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148,

Florida Statutes.

Wendy Duvall
SIGNATURE OF REPORTING OFFICIAL

STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>29th</u> day of <u>July</u> , 20 <u>14</u> by <u>Wendy Duvall</u>  (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <input type="checkbox"/> OR Produced Identification <input type="checkbox"/> Type of Identification Produced _____

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Gonzalez Jorge			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7900 Harbor Island Drive, PH#5			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input checked="" type="checkbox"/> DECEMBER	
			YEAR 2012	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
December 6, 2012	Miami-Dade League of Cities Dinner	\$40.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

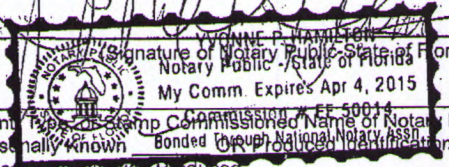
☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes. SIGNATURE OF REPORTING OFFICIAL	STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>24th</u> day of <u>July</u> , 2014 by <u>Jorge Gonzalez</u>  (Print Name of Notary Public, State of Florida) My Comm. Expires Apr 4, 2015 (Print Type of Stamp Commissioned Name of Notary Public) Personally Known <input checked="" type="checkbox"/> Bonded Through National Notary Assn. Type of Authentication Produced
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Gonzalez Jorge			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7900 Harbor Island Drive, PH5			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 20 <u>13</u>	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
February 9, 2013	Miamio-Dade League 59th Installation Gala	\$214.29	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

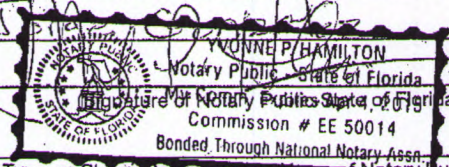
If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do
depone on oath or affirmation and say that the information disclosed
herein and on any attachments made by me constitutes a true accurate,
and total listing of all gifts required to be reported by Section 112.3148,
Florida Statutes.

SIGNATURE OF REPORTING OFFICIAL

STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>24th</u> day of <u>July</u> , 20 <u>14</u> by <u>[Signature]</u> by <u>[Signature]</u>  (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <u> </u> OR Produced Identification <u> </u> Type of Identification Produced <u> </u>

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Gonzalez Jorge			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7900 Harbor Island Drive, PH#5			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input checked="" type="checkbox"/> DECEMBER	
			YEAR 20 <u>13</u>	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
December 5, 2013	Miami-Dade League of Cities Dinner	\$40.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.	STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>24th</u> day of <u>July</u> , 2014 by <u>[Signature]</u>
	 (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <input checked="" type="checkbox"/> OR Produced Identification <input type="checkbox"/> Type of Identification Produced _____
SIGNATURE OF REPORTING OFFICIAL <u>[Signature]</u>	

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Gonzalez Jorge			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7900 Harbor Island Drive, PH#5			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 20 <u>14</u>	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
February 8, 2014	Miami-Dade League of Cities 60th Installation Gala	\$150.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

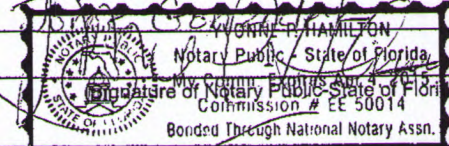
☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.	STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>20th</u> day of <u>July</u> , 20 <u>14</u>
	by <u>[Signature]</u>  (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____
SIGNATURE OF REPORTING OFFICIAL <u>[Signature]</u>	

PART D — FILING INSTRUCTIONS

This form, when duly signed and notarized, must be filed with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, Florida 32303. The form must be filed no later than the last day of the calendar quarter that follows the calendar quarter for which this form is filed (For example, if a gift is received in March, it should be disclosed by June 30.)

Form 9**QUARTERLY GIFT DISCLOSURE
(GIFTS OVER \$100)**

LAST NAME -- FIRST NAME -- MIDDLE NAME: Gonzalez Jorge			NAME OF AGENCY: North Bay Village	
MAILING ADDRESS: 7900 Harbor Island Drive, PH#5			OFFICE OR POSITION HELD: Commissioner	
CITY: North Bay Village	ZIP: 33141	COUNTY: Miami-Dade	FOR QUARTER ENDING (CHECK ONE): <input checked="" type="checkbox"/> MARCH <input type="checkbox"/> JUNE <input type="checkbox"/> SEPTEMBER <input type="checkbox"/> DECEMBER	
			YEAR 2014	

PART A — STATEMENT OF GIFTS

Please list below each gift, the value of which you believe to exceed \$100, accepted by you during the calendar quarter for which this statement is being filed. You are required to describe the gift and state the monetary value of the gift, the name and address of the person making the gift, and the date(s) the gift was received. If any of these facts, other than the gift description, are unknown or not applicable, you should so state on the form. As explained more fully in the instructions on the reverse side of the form, you are not required to disclose gifts from relatives or certain other gifts. You are not required to file this statement for any calendar quarter during which you did not receive a reportable gift.

DATE RECEIVED	DESCRIPTION OF GIFT	MONETARY VALUE	NAME OF PERSON MAKING THE GIFT	ADDRESS OF PERSON MAKING THE GIFT
March 6, 2014	Miami-Dade League of Cities Dinner	\$40.00	North Bay Village	1666 Ken. Cswy., #300 N. Bay Village, FL 33141
	(Guest)			

☐ CHECK HERE IF CONTINUED ON SEPARATE SHEET

PART B — RECEIPT PROVIDED BY PERSON MAKING THE GIFT

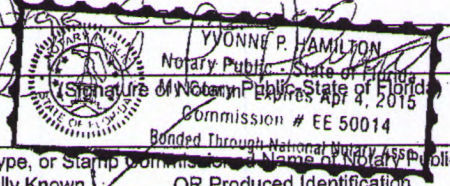
If any receipt for a gift listed above was provided to you by the person making the gift, you are required to attach a copy of that receipt to this form. You may attach an explanation of any differences between the information disclosed on this form and the information on the receipt.

☐ CHECK HERE IF A RECEIPT IS ATTACHED TO THIS FORM

PART C — OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed herein and on any attachments made by me constitutes a true accurate, and total listing of all gifts required to be reported by Section 112.3148, Florida Statutes.

SIGNATURE OF REPORTING OFFICIAL

STATE OF FLORIDA COUNTY OF <u>Miami-Dade</u> Sworn to (or affirmed) and subscribed before me this <u>24th</u> day of <u>July</u> , 2014 by <u>Jorge Gonzalez</u>  (Print, Type, or Stamp Commissioned Name of Notary Public) Personally Known <input checked="" type="checkbox"/> OR Produced Identification <input type="checkbox"/> Type of Identification Produced _____

PART D — FILING INSTRUCTIONS

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