

MIAMI-DADE COMMISSION ON ETHICS & PUBLIC TRUST
COMPLAINT FORM



COMPLAINANT (Person bringing complaint):

Name: Stephanie Kienzle
Address: 7535 SW 26 Court City: Davie Zip Code 33314
Contact No.'s: *Specify Home, Work &/or Cell* 305-335-2093 Cell
E-mail: stephanie.kienzle@gmail.com

RESPONDENT (Person against whom complaint is made):

Name: McKenzie Fleurimond
Address: NMB City Hall, 17011 NE 19 Avenue City North Miami Beach Zip Code 33162
Contact No(s): *Specify Work &/or Cell* 786-712-4216 Cell
Title/Office Held or Sought: North Miami Beach Commissioner

ALLEGATION refers to: ___ Person in County Gov't. Person in municipal Gov't. (Specify city) North Miami Beach
AND

___ Elections Ethical Campaign Ordinance (Refer to Instructions) ___ County's Citizens' Bill of Rights
___ Employee Protection Ordinance (Whistleblower retaliation) (Refer to Instructions) County/Municipal Ethics Code
___ Other (Specify) _____

Note: The Ethics Commission does not have jurisdiction over Florida Statutes, State or Federal officials, Judges, or the Miami- Dade County School Board.

STATEMENT OF FACTS BASED ON PERSONAL KNOWLEDEGE: In a separate attachment, please describe in detail the facts and actions that form the basis of your complaint, including dates when the action(s) occurred. Also, attach any relevant documents as well as names and contact information of witnesses or other persons who may have knowledge about the actions. If known, **indicate the section of the ordinance you believe is being violated.** Please refer to the Instructions attached to this Complaint Form for further assistance.

OATH:

I, Stephanie Kienzle, do swear or affirm that the facts set forth in the foregoing complaint & attachments are true and correct to the best my knowledge.




Signature of Complainant /Affiant

STATE OF FLORIDA
COUNTY OF Broward

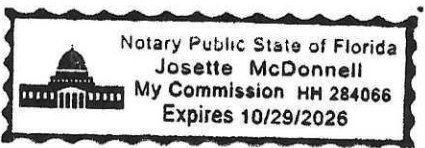
Sworn to (or affirmed) and subscribed before me by means of [] physical presence or [] online notarization this 6th day of February, 2023

By _____
Name of Complainant/Affiant
Personally known to me or produced identification ()



Signature of Notary Public, State of Florida

Print, Type or Stamp Commissioned Name of Notary Public



ALLEGATIONS AGAINST MCKENZIE FLEURIMOND

McKenzie Fleurimond is a North Miami Beach Commissioner.

Per the attached Bank of American Purchasing Card Statement for the period ending January 4, 2022, McKenzie Fleurimond charged the sum of \$300.00 the Florida Democratic Party

A Public Records Request revealed that this amount was for a contribution to the Florida Democratic Party, per the attached email from Nadia Brewton to McKenzie Fleurimond dated December 3, 2021.

The government of the City of North Miami Beach consisting of one (1) Mayor and six (6) Commissioners is a non-partisan body.

McKenzie Fleurimond's donation to a political party benefits only himself. It should not be paid by the City, since there is no public purpose or benefit for the residents of North Miami Beach.

Sec. 2-11.1.(g) of the Miami-Dade County Conflict of Interest and Code of Ethics states:

"(g) Exploitation of official position prohibited. No person included in the terms defined in subsection (b)(1) through (6) and (b)(13) shall use or attempt **to use his or her official position to secure special privileges or exemptions for himself or herself or others** except as may be specifically permitted by other ordinances and resolutions previously ordained or adopted or hereafter to be ordained or adopted by the Board of County Commissioners."



MCKENZIE FLEURIMOND
CITY OF N MIAMI BEACH
XXXX-XXXX-XXXX-7095

December 05, 2021 - January 04, 2022

Purchasing Card

Cardholder Activity

Account Information	Payment Information	Account Summary
Mail Billing Inquiries to: BANKCARD CENTER PO Box 660441 Dallas, TX 75266-0441 TTY Hearing Impaired: Dial "711" Outside the U.S.: 1.509.353.6656 24 Hours For Lost or Stolen Card: 1.888.449.2273 24 Hours	Statement Date 01/04/22 Credit Limit \$5,000 Cash Limit \$0 Days in Billing Cycle 31 Total Activity \$1,552.65 THIS IS NOT A BILL - DO NOT PAY	Credits \$0.00 Cash \$0.00 Purchases \$1,552.65 Other Debits \$0.00 Cash Fees \$0.00 Other Fees \$0.00 Total Activity \$1,552.65

Important Messages

Global Card Access - your card information whenever, wherever and however you need it. From the dashboard, you can quickly check your credit limit, balance, available credit and recent card activity. Other features like View PIN, Change PIN, Lock Card and Alerts help you keep your card secure. For added convenience, you can easily view or download your current statement up to 12 months of past statements. Visit www.bofa.com/globalcardaccess to register your card and start using Global Card Access today.

Transactions

Posting Transaction

Date	Date	Description	Reference Number	MCC	Charge	Credit
12/06	12/03	ACTBLUE* FLDEMOCRATICP	HTTPSSecure.AMA	24492161337000040042961	8651	300.00
12/06	12/05	TST* THE BRIARPATCH	WINTER PARK FL	24137461339200141445039	5812	39.88
12/07	12/05	HYATT REGENCY ORLANDO	8558690846 FL	24943001340722817148527	3640	662.74
		Arrival: 12/03/21				
12/08	12/07	EIG*CONSTANTCONTACT.COM	855-2295506 MA	24906411341135961563000	5968	95.00
12/13	12/10	AMERICAN AIR0012317891999	FORT WORTH TX	24943001345978000432137	3001	256.81
		BREWTON/NADIA				
		0012317891999				
		Departure Date: 01/28/22	Airport Code: MIA			
		AA S PHX				

00000000 00000000 00000000 119.071(9) (b) Bank Account Info

Account Number: XXXX-XXXX-XXXX-7095
December 05, 2021 - January 04, 2022

Total Activity \$1,552.65

BANK OF AMERICA
PO BOX 15731
WILMINGTON, DE 19886-5731

MCKENZIE FLEURIMOND
CITY OF N MIAMI BEACH
17011 NE 19TH AVE RM 315
NORTH MIAMI BEACH, FL 33162-3111

Cardholder Signature _____ Date _____

Manager Signature _____ Date _____

Posting payments: Payments received by mail at the remittance address shown on the Payment Coupon portion of the face of this statement on a banking day will be posted to your account on the day received. If we receive your mailed payment on a non-banking day, we will post it to your account on the next banking day. There may be a delay of up to 5 banking days in posting payments made at a location other than the mailing address listed on the front of your payment coupon.

Service for the hearing impaired (TTY/TDD): We accept calls made through relay services (dial 711).

Telephone monitoring: For the purposes of monitoring and improving the quality of service, Bank's supervisory personnel may listen to and/or record telephone calls between Bank employees and any person acting on Company's behalf.

In case of errors or questions about your bill: Errors or questions about your bill must be received in writing no later than 60 days after we sent you the first statement on which the error or problem appeared. Please mail this information to BANKCARD CENTER, PO BOX 660441, DALLAS, TX 75266-0441. Your letter must include the following information:

- . The company name, cardholder name and account number in question.
- . The dollar amount of the suspected error.
- . A written description of the error and why you believe there is an error. If you need more information, describe the item you are unsure about.

Customer Service:	For questions regarding transactions, general assistance, and reporting lost and stolen cards, call:	
	<u>Within the U.S.</u> 1.888.449.2273	<u>Outside the U.S.</u> 1.509.353.6656 (collect calls accepted)

Thank you for your business.

Posting payments: Payments received by mail at the remittance address shown on the Payment Coupon portion of the face of this statement on a banking day will be posted to your account on the day received. If we receive your mailed payment on a non-banking day, we will post it to your account on the next banking day. There may be a delay of up to 5 banking days in posting payments made at a location other than the mailing address listed on the front of your payment coupon.

MCKENZIE FLEURIMOND
 CITY OF N MIAMI BEACH
 XXXX-XXXX-XXXX-7095
 December 05, 2021 - January 04, 2022
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Transactions

<i>Posting Transaction</i>						
<i>Date</i>	<i>Date</i>	<i>Description</i>	<i>Reference Number</i>	<i>MCC</i>	<i>Charge</i>	<i>Credit</i>
		Departure Date: 01/28/22 Airport Code: PHX AA N MIA				
12/13	12/10	AMERICAN AIR0012317894281FORT WORTH TX FLEURIMOND/MCKENZIE 0012317894281	24943001345978000432384	3001	123.41	
		Departure Date: 01/31/22 Airport Code: PHX AA N MIA				
12/13	12/10	AMERICAN AIR0010643720554FORT WORTH TX FLEURIMOND/MCKENZIE 0010643720554	24943001345978001355386	3001	74.81	
		Departure Date: 12/10/21 Airport Code: RVU AA Y FEE				

MCKENZIE FLEURIMOND
CITY OF N MIAMI BEACH
XXXX-XXXX-XXXX-**7095**
December 05, 2021 - January 04, 2022
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Public Records Exemptions

Enclosed please find a copy of the response documents for your public records request. The following information is provided to explain the process employed to review and produce the response documents.

Page	Reason	Description
1	119.071(9) (b) Bank Account Info	Bank Account Numbers, Debit, Charge & Credit Card Numbers

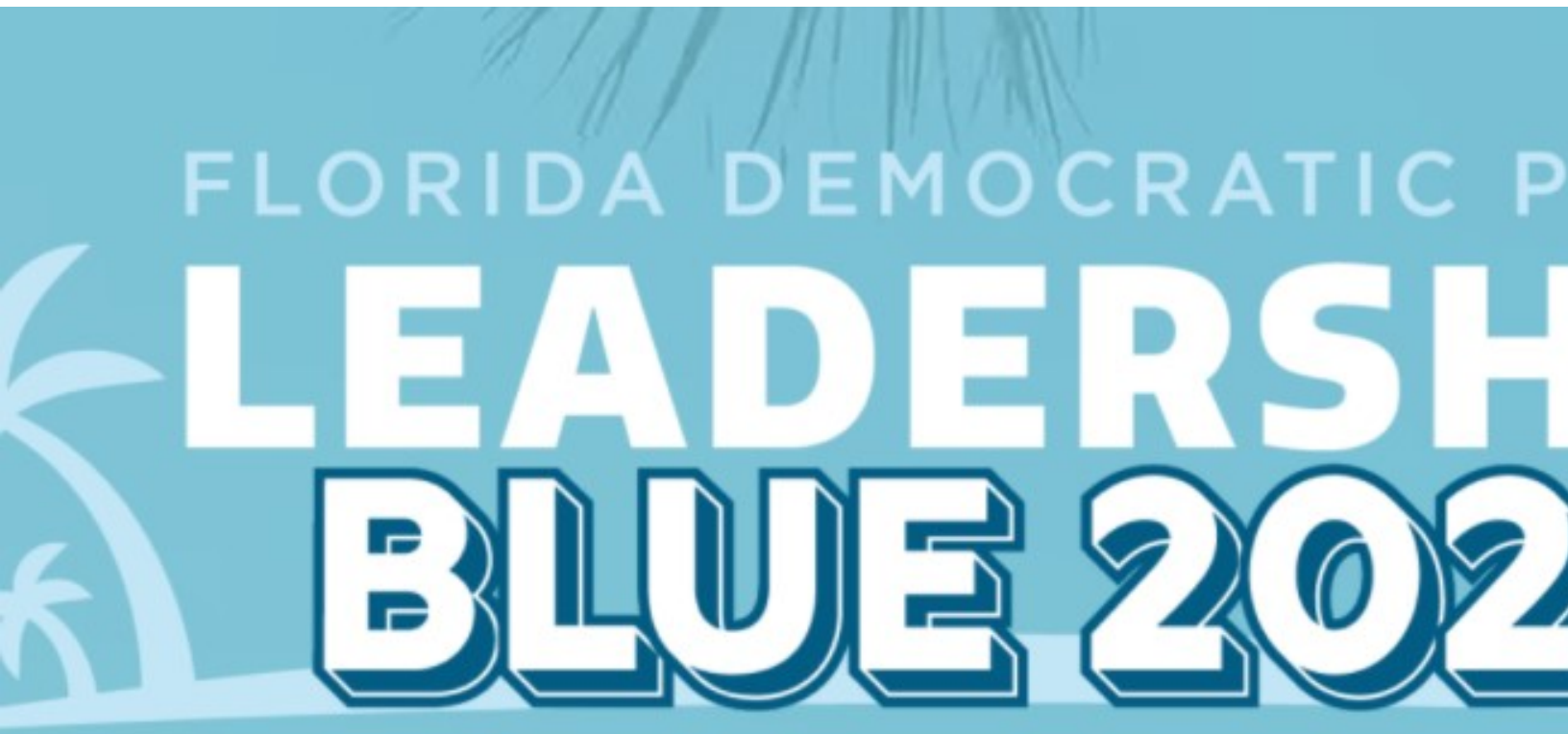
Brewton, Nadia

From: info+AB210010384@actblue.com on behalf of ActBlue Receipts <info+AB210010384@actblue.com>
Sent: Friday, December 3, 2021 2:39 PM
To: Fleurimond, McKenzie
Subject: Thank you for your contribution to Florida Democratic Party - Federal Account!

Follow Up Flag: Follow up
Flag Status: Flagged

[EXTERNAL] This email originated from outside the organization.
Do not click links or open attachments unless you recognize the sender and know the content is safe.

Here's a receipt for your \$300.00 contribution. Please complete the ticket information.



What you'll be joining us for our Leadership Blue 2021 Gala!

Please feel welcome to reach out to kpatterson@floridadems.org with any questions.

[LeadershipBlue.com](https://www.leadershipblue.com) for a full schedule of free trainings, panels, and receptions throughout the Leadership Blue 2021 weekend

and sponsorship sales are final and non-refundable.

Your contribution receipt

\$300.00

One-time contribution

Thank you for your contribution in support of Florida Democratic Party - Federal Account!

1 Individual Gala ticket ticket	\$300.00
Total charged	\$300.00

Name McKenzie Fleurimond

Order # [AB210010384](#)

Order Date 12/3/2021

Payment Type VISA 7095

Billing ZIP 33163

This transaction will appear as one or more charges to ACTBLUE*FLDEMOCRATICPARTY on your credit card statement.


- [Unsure about this charge?](#)

Tired of entering your payment information every time?

[Create an ActBlue Express account](#)

And save time while contributing more effectively to the candidates and causes you support. Plus, review your full giving history at any time.

Your ticket summary

Fundraising Page  Join your fellow Florida Dems for an incredible night!

Ticket Count 1 Individual Gala ticket

Tickets will be sent to your guests individually, after you complete the ticket information.

- [Complete your ticket information](#)

Paid for by the Florida Democratic Party – (850) 222-3411 – This communication is not authorized by any candidate or candidate’s committee. Contributions or donations to the Florida Democratic Party are not tax deductible. Your contribution to the Florida Democratic Party will support efforts to support Democrats at all levels of elected office.

Paid for by ActBlue (actblue.com) and not authorized by any candidate or candidate's committee.

Contributions or gifts to ActBlue are not tax deductible as charitable contributions for federal income tax purposes.

Need help? Reply to this email or drop us a line at info@actblue.com.

PLEASE NOTE: The City of North Miami Beach is a public entity subject to Chapter 119 of the Florida Statutes concerning public records. E-mail messages are covered under such laws and thus subject to disclosure. All e-mail sent and received is captured by our servers and kept as public record.