

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

JAN 29 PM 3:58

yy

I, Aharon Brisk ,

candidate for the office of Surfside Commission ;

have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X

A Brisk

Signature of Candidate

1/29/20

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)
(PLEASE PRINT OR TYPE)

JAN 29 PH 3:58

yy

COPY

NOTE: This form must be on file with the filing 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):
(Please Print or Type Name)

AHARON BRISK

3. Address (include PO Box or Street, City, State, Zip Code):
9455 COLLINS AVE APT 704
SURFSIDE, FL 33154

4. Telephone:

(917) 577-9009

5. Candidate's Voter Registration #:

131368106

(not required for qualifying purposes)

6. Email Address:

hershybrisk@gmail.com

7. Office Sought (include district, circuit, group, or seat #):

Surfside commission

8. If a candidate for a nonpartisan office, check the box
if applicable:

I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

Write-In Candidate. No Party Affiliation Candidate. _____ Party candidate.

10. I have appointed the following person to act as my: Campaign Treasurer Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Aharon Brisk

12. Telephone:

(917) 5779009

13. Email Address:

hersheybrisk@gmail.com

14. Mailing Address:

9455 collins ave apt 704

15. City:

surfside

16. State:

fl

17. Zip Code:

33154

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

20. Address:

21. City:

22. County:

23. State:

24. Zip Code:

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE
CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

26. Signature of Candidate:

X *A Brisk*

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

I, AHARON BRISK

(Please Print or Type Name) do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

28. Date: 1/29/20

29. Signature of Campaign Treasurer or Deputy Treasurer

X *A Brisk*

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

JAN 29 PM 3:58

yy

JAN 30 AM 11:33

yy

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2. Name of Candidate (in this order: First, Middle, Last):
(Please Print or Type Name)

AHARON BRISK

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9455 COLLINS AVE APT 704
SURFSIDE, FL 33154

4. Telephone:

(917) 577-9009

5. Candidate's Voter Registration #:

131368106

(not required for qualifying purposes)

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hershybrisk@gmail.com

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Surfside commission

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Aharon Brisk

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13. Email Address:

hersheybrisk@gmail.com

14. Mailing Address:

9455 collins ave apt 704

15. City:

surfside

16. State:

fl

17. Zip Code:

33154

18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository

19. Name of Bank:

WELLIS FARGO

20. Address:

9491 HARDING AV

21. City:

SURFSIDE

22. County:

MAMI DAF

23. State:

MIAMI F.I.

24. Zip Code:

33154

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

JAN/29/26

26. Signature of Candidate:

X Ah Brisk

27.

Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)

I, AHARON BRISK

(Please Print or Type Name)

do hereby accept the appointment designated above as:

Campaign Treasurer.

Deputy Treasurer.

28. Date:

1/29/26

29. Signature of Campaign Treasurer or Deputy Treasurer

X Ah Brisk



TOWN OF SURFSIDE

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154

GENERAL ELECTION – MARCH 17, 2026

RECEIPT OF DOCUMENTS

Candidate:

AHARON

BRISK

First Name

Middle Name

Last name

commissioner

Office Sought (Mayor or Commissioner)

Phone No.: 917 5779009

Cell Phone: 917 577 9009

E-Mail Address: HERSHYBRISK@gmail.com

This is to acknowledge my receipt of the following documents:

- The Florida Election Code (2024) – Available on the Town's website
- Candidate and Campaign Treasurer Handbook (2024) – Available on the Town's website
- Guide to the Sunshine Amendment and Code of Ethics (2025) – Available on the Town's website
- Reporting Dates Schedule (Election Date: March 17, 2026)
- Campaign Activities Memorandum

Received by:

W. Brisk

Candidate Signature

Date:

1/30/20



Town of Surfside

9293 Harding Avenue
Surfside, FL 33154

2026 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate AHARON BRISK

Office Sought _____

Phone No.: 917 5779009 Cell Phone No: _____

E-Mail Address: HERSHYBRISK@gmail.com

<u>Contents</u>	<u>Date Received</u>	<u>Initials</u>
1. Qualifying as a candidate:		
Appointment of Campaign Treasurer and Designation of Campaign Depository	<u>1/30/26</u>	<u>ABR</u>
Nominating Petition		<u>AB</u>
Statement of Candidate	<u>1/29/26</u>	<u>AB</u>
Sworn Statement of Qualification		
Candidate Oath		
Form 1 – Statement of Financial Interest (2025)		
Declaration and First Amendment Waiver Volunteer Statement of Fair Campaign Practice		
Qualifying Fee \$25.00		
L & A Schedule		

2. Important Dates to Remember _____

3. Campaign Activities Memorandum _____

Candidate's Signature

Date