

# STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

JAN 12 PM 1:36

*4me*

I, Donna Dayana Benmergul,

candidate for the office of Commissioner;

have been provided access to read and understand the requirements of

Chapter 106, Florida Statutes.

X

  
Signature of Candidate

Jan 12, 26  
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 12 PM 1:36

*Smc*

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)

*Donna Dayana Benmengui*

3. Address (include PO Box or Street, City, State, Zip Code):

*9149 Froude Ave.  
Surfside FL 33154*

4. Telephone:

*(305)7850115*

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

*dayialfon@hotmail.com*

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

*Commissioner*

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:

*Donna Dayana Benmengui*

12. Telephone:

*(305)7850115*

13. Email Address:

*dayialfon@hotmail.com*

14. Mailing Address:

*9149 Froude Ave, Surfside*

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:

*Jan 12, 2026*

26. Signature of Candidate:

*X*

*[Signature]*

27.

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

I, *Donna Dayana Benmengui* do hereby accept the appointment designated above as:  
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

28. Date:

*Jan 12, 2026*

29. Signature of Campaign Treasurer or Deputy Treasurer

*X*

*[Signature]*

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

JAN 12 PM 4:15 SMC

JAN 12 PM 1:36 SMC

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)

Donna Dayana Benmengui

**3. Address** (include PO Box or Street, City, State, Zip Code):

9149 Froude Ave.  
Surfside FL 33154

**4. Telephone:**

(305) 785 0115

**5. Candidate's Voter Registration #:**

\_\_\_\_\_  
(not required for qualifying purposes)

**6. Email Address:**

dayialfon@hotmail.com

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

Commissioner

**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:**

Donna Dayana Benmengui

**12. Telephone:**

(305) 785 0115

**13. Email Address:**

dayialfon@hotmail.com

**14. Mailing Address:**

9149 Froude Ave, Surfside

**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:**

400 Arthur Godfrey Rd. suite 102

**21. City:**

Miami Beach

**22. County:**

Dade

**23. State:**

FL

**24. Zip Code:**

33140

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 12, 2026

**26. Signature of Candidate:**

X

*[Signature]*

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

I, Donna Dayana Benmengui do hereby accept the appointment designated above as:  
(Please Print or Type Name)

Campaign Treasurer.

Deputy Treasurer.

**28. Date:** Jan 12, 2026

**29. Signature of Campaign Treasurer or Deputy Treasurer**

X

*[Signature]*



## TOWN OF SURFSIDE

MUNICIPAL BUILDING  
9293 HARDING AVENUE  
SURFSIDE, FLORIDA 33154

**GENERAL ELECTION – MARCH 17, 2026**

### RECEIPT OF DOCUMENTS

Candidate:

Donna

First Name

Dayana

Middle Name

Benmergui

Last name

Commissioner.

Office Sought (Mayor or Commissioner)

Phone No.: 305-785 0115

Cell Phone: 11

E-Mail Address: dayialfon @ hot mail. 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:

*[Handwritten Signature]*  
Candidate Signature

Date: Jan 12, 26



# *Town of Surfside*

9293 Harding Avenue  
Surfside, Fl 33154

## 2026 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate Donna Dayana Benmergu

Office Sought Commissioner

Phone No.:                   ←           Cell Phone No: 305-7850115

E-Mail Address: dayialfon@hotmail.com

Contents

Date Received

Initials

1. Qualifying as a candidate:

Appointment of Campaign Treasurer and  
Designation of Campaign Depository

1/12/2026

D.B

Nominating Petition

1/12/2026.

D. B.

Statement of Candidate

1/12/2026.

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

1/12/2026

D.B

1/12/2026

D.B

---

Candidate's Signature

---

Date



JAN 29 PM 2:58

## TOWN OF SURFSIDE

MUNICIPAL BUILDING  
9293 HARDING AVENUE  
SURFSIDE, FLORIDA 33154

GENERAL ELECTION – MARCH 17, 2026

### SWORN STATEMENT OF QUALIFICATION

Pursuant to Article VI, Section 102 of the Town of Surfside Charter, this form must be submitted simultaneously with the nominating petitions and qualifying fee of \$25.00 made payable to the Town of Surfside.

STATE OF FLORIDA      }

COUNTY OF MIAMI-DADE }

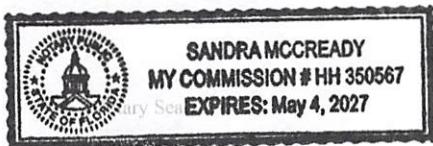
TOWN OF SURFSIDE      }

I solemnly swear (or affirm) under oath, that my name is Donna Dayana Benmergui that I am a Citizen of the United States, a qualified elector of Miami Dade County and the Town of Surfside, Florida; that my address is 9149 Froude Ave, Surfside FL 33154 my occupation is Stay home; that I have been a resident of the Town of Surfside since 2005; that I will be at least twenty-one (21) years of age by February 2, 2026 and that if elected, I will willingly serve as Commissioner (Mayor or Commissioner) of the Town of Surfside, if elected.

  
\_\_\_\_\_  
Signature of Candidate

1/29/26  
\_\_\_\_\_  
Date

Sworn to and subscribed before me this 24 day of January, 20 26.



  
\_\_\_\_\_  
NOTARY PUBLIC

  
\_\_\_\_\_  
PRINTED NAME OF NOTARY

**CANDIDATE OATH****NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)  
Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

JAN 29 PM 2:58

OFFICE USE ONLY

**Candidate Oath**

Name to appear on ballot: Donna Dayana Benmerguji

Check box if two last names without hyphen.  (Name cannot be changed after qualifying.)

Check box if name includes nickname.  (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the nonpartisan office of Commissioner, (District #),  
(Office) Miami Dade County, Florida  
(Circuit #) (Group or Seat #)

I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

**Statement of Outstanding Fines, Fees, or Penalties**

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).

YES, I Do  NO, I Do Not

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X   
Signature of Candidate (305) 785 0115 Telephone Number dayajafon@hotmail.com  
9149 Froude Ave Surfside FL 33154  
Address of Legal Residence City State ZIP Code

**STATE OF FLORIDA**

COUNTY OF Miami-Dade.

Sworn to (or affirmed) and subscribed before me by means of

online notarization  OR physical presence

this 29 day of January, 202020

Personally Known  OR Produced Identification

Type of Identification Produced: DL

**Signature of Notary Public**

Print, Type, or Stamp Commissioned Name of Notary Public below:



## 2025 Form 1 - Statement of Financial Interests

**General Information**

Name: Mrs Donna Benmergui

Organization	Suborganization	Title
N/A		

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 1 (Effective 6/10/2024)	Town of Surfside	Commissioner

**Disclosure Period**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2025.

**Primary Sources of Income**

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person)  
(If you have nothing to report, write "none" or "n/a")

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
Rental home	2770 NE 30 St, Lighthouse	rental property
Rental unit	10000 West Bay Harbor Dr	rental

## 2025 Form 1 - Statement of Financial Interests

### Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

### Real Property

REAL PROPERTY (Land, buildings owned by the reporting person)  
(If you have nothing to report, write "none" or "n/a")

Location/Description
2770 NE 30 street, Lighthouse Point
10000 West Bay Harbor Dr

### Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over \$10,000)  
(If you have nothing to report, write "none" or "n/a")

Type of Intangible	Business Entity to Which the Property Relates
IRA	Bank

## 2025 Form 1 - Statement of Financial Interests

### Liabilities

LIABILITIES (Major debts valued over \$10,000):  
(If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor
Bank of America	100 North Tryon Street, Charlotte, NC 28255
Amerihome	Baxter Way, Suite 300, Thousand Oaks, CA 91362-3880
SPS	PO Box 65250 Salt Lake City, UT 84165-0250
Chase Financial	00 Kansas Lane, LA4-0006, Monroe, LA 71203-4774

### Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses)  
(If you have nothing to report, write "none" or "n/a")

Business Entity # 1

N/A

### Signature of Filer

*Donna Benmergui*

Digitally signed: 01/29/2026

**CASHIER'S CHECK**



Remitter: DONNA BENMERGUI FOR CITY COM

Pay to the Order of: TOWN OF SURFSIDE

Twenty Five Dollars And 00/100 ¢

331801830

DATE: 01/14/2026

\$25.00

*David J. Jennings*  
Corporate Controller

## TOWN OF SURFSIDE

9293 Harding Ave.  
SURFSIDE, FL 33154

Receipt

Nº 155466

RECEIVED OF

DATE

DOLLARS \$

Donna Benmerqui - Qualifiers Fee 1-29-2026  
Twenty Five 00/100 25.00

## HOW PAID

CASH ~~\*331801830~~CHECK EXECUTIVE CHECK # POLICE MONEY ORDER PARK & RECREATION CREDIT CARD OTHER 

BY

DM

THANK YOU

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION  
PLEASE SIGN AND PRINT YOUR NAME CLEARLY JAN 29 PM 2:58

## NOMINATING PETITION FOR MAYOR OR COMMISSIONER

### TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Donna Dayana Benmerguí for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 17, 2026.

This petition must be filed with the Town Clerk between January 12, 2026 and February 2, 2026 (by 12:00pm).

Signature: <u>John</u>	Date: 01/12/2026 D.O.B. [REDACTED]
Print Name: <u>MARK ADUININ</u>	Address: [REDACTED]
Signature: <u>Julia Aquinini</u>	Date: 01/12/2026 D.O.B. [REDACTED]
Print Name: <u>SUSTANA AQUININI</u>	Address: [REDACTED]
Signature: <u>Julia</u>	Date: 01/12/2026 D.O.B. [REDACTED]
Print Name: <u>ABRAMAH AQUININI</u>	Address: [REDACTED]
Signature: <u>Julia</u>	Date: 01/12/2026 D.O.B. [REDACTED]
Print Name: <u>ESMERALDA AQUININI</u>	Address: [REDACTED]
Signature: <u>Car</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u>Dorothy Ness</u>	Address: [REDACTED]
Signature: <u>Gaudenz Koskas</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u></u>	Address: [REDACTED]
Signature: <u>Eliezer</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u>Enna Kadouch</u>	Address: [REDACTED]
Signature: <u>Max</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u>Max Aquinini</u>	Address: [REDACTED]
Signature: <u>Max</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u>JONATHAN RUBINSTEIN</u>	Address: [REDACTED]
Signature: <u>M. Rubinstein</u>	Date: 1-13-26 D.O.B. [REDACTED]
Print Name: <u>Menachem Rubinstein</u>	Address: [REDACTED]
Signature: <u>D. Talant</u>	Date: 1-13-26 D.O.B. [REDACTED]
Print Name: <u>Dora Rubinstein</u>	Address: [REDACTED]
Signature: <u>William Berkowitz</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u>Lilian Berkowitz</u>	Address: [REDACTED]
Signature: <u>Maria Berkowitz</u>	Date: 01/13/26 D.O.B. [REDACTED]
Print Name: <u></u>	Address: [REDACTED]

#### STATEMENT OF CIRCULATOR

The undersigned is the circulator of the foregoing paper containing 13 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: John

Address of Circulator: 9149 Froude Ave, Surfside FL 33154

Email address of Circulator: dayianafon@hotmail.com

#### ACCEPTANCE OF NOMINATION

I hereby accept the nomination for the office of Commissioner (Mayor or Commissioner) and agree to serve if elected.

Signature of Candidate: John Date: 1/29/26

YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION  
PLEASE SIGN AND PRINT YOUR NAME CLEARLY

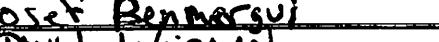
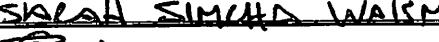
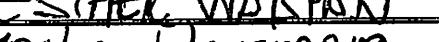
JAN 29 PM 2:58

**NOMINATING PETITION FOR MAYOR OR COMMISSIONER**

**TOWN OF SURFSIDE, FLORIDA**

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Donna Dayana Benmergui (Mayor or Commissioner) at an election to be held on March 17, 2026.

*This petition must be filed with the Town Clerk between January 12, 2026 and February 2, 2026 (by 12:00pm).*

Signature: 	Date: 01/12/26 D.O.B. [REDACTED]
Print Name: <u>STUART HALIN</u>	Address: [REDACTED]
Signature: 	Date: 1/12/26 D.O.B. [REDACTED]
Print Name: <u>YUDAH BENMERGUI</u>	Address: [REDACTED]
Signature: 	Date: 1/17/26 D.O.B. [REDACTED]
Print Name: <u>ISAAC AMARAN</u>	Address: [REDACTED]
Signature: 	Date: 1/12/26 D.O.B. [REDACTED]
Print Name: <u>Jonathan Eddorei</u>	Address: [REDACTED]
Signature: 	Date: 1-12-25 D.O.B. [REDACTED]
Print Name: <u>Shimi Benmergui</u>	Address: [REDACTED]
Signature: 	Date: 1/12/25 D.O.B. [REDACTED]
Print Name: <u>Yosef Benmergui</u>	Address: [REDACTED]
Signature: 	Date: 1/12/25 D.O.B. [REDACTED]
Print Name: <u>Daniel Waisman</u>	Address: [REDACTED]
Signature: 	Date: 1/12/26 D.O.B. [REDACTED]
Print Name: <u>SARAH SIMCHA WAIMAN</u>	Address: [REDACTED]
Signature: 	Date: 1/12/26 D.O.B. [REDACTED]
Print Name: <u>ESTHER WAIMAN</u>	Address: [REDACTED]
Signature: 	Date: 1/12/26 D.O.B. [REDACTED]
Print Name: <u>Moshe Waisman</u>	Address: [REDACTED]
Signature: 	Date: 1.12.2020 D.O.B. [REDACTED]
Print Name: <u>Judy Benmergui</u>	Address: [REDACTED]
Signature: 	Date: 1.12.2020 D.O.B. [REDACTED]
Print Name: <u>Tania Bentolila</u>	Address: [REDACTED]
Signature: 	Date: 1-13-26 D.O.B. [REDACTED]
Print Name: <u>ISAAC BENMERGUI</u>	Address: [REDACTED]

**STATEMENT OF CIRCULATOR**

The undersigned is the circulator of the foregoing paper containing 13 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator: 

Address of Circulator: 9149 Grodke Ave, Surfside FL 33154

Email address of Circulator: dayialfon@hotmail.com

**ACCEPTANCE OF NOMINATION**

I hereby accept the nomination for the office of Commissioner (Mayor or Commissioner) and agree to serve if elected.

Signature of Candidate:  Date: 1/29/26

**YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION  
PLEASE SIGN AND PRINT YOUR NAME CLEARLY JAN 29 PM 2:58**

## **NOMINATING PETITION FOR MAYOR OR COMMISSIONER**

# **TOWN OF SURFSIDE, FLORIDA**

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Donna Dayne for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 17, 2026.

**This petition must be filed with the Town Clerk between January 12, 2026 and February 2, 2026 (by 12:00pm).**

## **STATEMENT OF CIRCULATOR**

The undersigned is the circulator of the foregoing paper containing 8 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

**Signature of Circulator:**

Address of Circulator: 9149 Froude Ave, Surfside FL 33154

Email address of Circulator: dayialfon@hotmail.com

## ACCEPTANCE OF NOMINATION

I hereby accept the nomination for the office of Commissioner (Mayor or Commissioner) and agree to serve if elected.

Signature of Candidate:  Date: 1/29/26



## Town of Surfside

9293 Harding Avenue  
Surfside, Fl 33154

### 2026 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate Donna Dayana Benmergu

Office Sought Commissioner

Phone No.: ← Cell Phone No: 305-7850115

E-Mail Address: dayialfon@hotmail.com

#### Contents

#### Date Received

#### Initials

##### 1. Qualifying as a candidate:

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Designation of Campaign Depository

1/12/2026 D.B.

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1/29/2026. D.B.

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1/29/2026. D.B.

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— D.B.

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Qualifying Fee \$25.00

1/29/2026. D.B.

L & A Schedule

1/29/2026. D.B.

2. Important Dates to Remember  
3. Campaign Activities Memorandum

1/12/2026

D.B

1/12/2026

D.B



Candidate's Signature

1/29/26

Date

**Alina Garcia**  
Supervisor of Elections  
  
2700 NW 87th Ave  
Miami, FL 33172



T 305-499-VOTE(8683)  
F 305-499-8501  
TTY 305-499-8480  
  
[votemiamidade.gov](http://votemiamidade.gov)  
@votemiamidade

February 2, 2026

Sandra McCready, MPA, MMC  
Town Clerk  
Town of Surfside  
9293 Harding Ave  
Surfside, FL 33154

Dear Mrs. McCready:

The Office of the Supervisor of Elections has completed the verification of the petitions for Donna Dayana Benmergui, a candidate for Commissioner for Town of Surfside. A total of 34 petitions were submitted. Per your request, we were to review petitions until a total of 25 valid petitions were met. Therefore, a total of 34 were reviewed for verification; of which 23 were certified.

For purposes of signature verification, my office follows the directives given by the municipality. You are encouraged to ensure compliance with municipal charter or code requirements.

Please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Michelle McClain, Deputy Supervisor of Elections for Voter Services at 305-499-8302.

Best Regards,

Jose Ponce  
Chief Deputy Supervisor of Elections  
Office of the Supervisor of Elections

Enclosure

Alina Garcia  
Supervisor of Elections  
  
2700 NW 87th Ave  
Miami, FL 33172



T 305-499-VOTE(8683)

F 305-499-8501

TTY 305-499-8480

votemiamidade.gov

@votemiamidade

## CERTIFICATION

### Batch 1

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, Alina Garcia, Supervisor of Elections of Miami-Dade, Florida, do hereby certify that **23** signatures submitted by Donna Dayana Benmerqui for the office of Commissioner for the Town of Surfside matched the signatures on the voter files.

WITNESS MY HAND  
AND OFFICIAL SEAL, AT  
MIAMI, MIAMI-DADE  
COUNTY, FLORIDA,  
ON THIS 2<sup>nd</sup> DAY OF  
FEBRUARY, 2026

Jose Ponce  
Chief Deputy Supervisor of Elections



**TOWN OF SURFSIDE**  
**Office of the Town Clerk**

MUNICIPAL BUILDING  
9293 HARDING AVENUE  
SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra N. McCready, MPA, MMC,  
Town Clerk

January 30, 2026

Ms. Michelle McClain  
Miami-Dade County Office of the Supervisor of Election  
2700 NW 87<sup>th</sup> Avenue  
Miami, FL 33172

RE: VERIFICATION OF PETITION SIGNATURES – Donna Dayana Benmergui

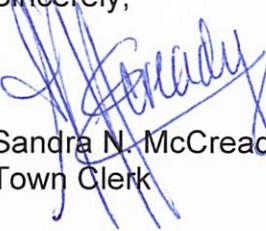
Dear Ms. McClain:

Enclosed are the original petition forms for DONNA DAYANA BENMERGUI. This petition is for a candidate seeking to qualify for office in the TOWN OF SURFSIDE. The Town Charter, under section 101 requires the verification of 25 valid signatures in order for the petition to be sufficient. Please verify signatures in accordance with the Town of Surfside Charter.

DONNA DAYANA BENMERGUI: Filed intent to run for office on January 12, 2026.

Please return the original petition forms to us along with a certificate certifying the number of valid signatures.

Sincerely,

  
Sandra N. McCready, MPA, MMC  
Town Clerk

**YOU MUST BE A REGISTERED VOTER OF THE TOWN OF SURFSIDE TO SIGN THIS PETITION  
PLEASE SIGN AND PRINT YOUR NAME CLEARLY**

## **NOMINATING PETITION FOR MAYOR OR COMMISSIONER**

## **TOWN OF SURFSIDE, FLORIDA**

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Donna Dayana Benmerah for the office of Commissioner (Mayor or Commissioner) at an election to be held on March 17, 2026.

**This petition must be filed with the Town Clerk between January 12, 2026 and February 2, 2026 (by 12:00pm).**

**STATEMENT OF CIRCULATOR**

The undersigned is the circulator of the foregoing paper containing 5 signatures. Each signature appended thereto was made in my presence and is the genuine signature of the person whose name it purports to be.

Signature of Circulator:

Address of Circulator: 9149 Froude Ave, Surfside FL 33154

Email address of Circulator: dayialfon@hotmail.com

### ACCEPTANCE OF NOMINATION

I hereby accept the nomination for the office of Commissioner (Mayor or Commissioner) and agree to serve if elected.

Signature of Candidate:  Date: 130/26

**Alina Garcia**  
Supervisor of Elections  
  
2700 NW 87th Ave  
Miami, FL 33172



T 305-499-VOTE(8683)  
F 305-499-8501  
TTY 305-499-8480  
  
**votemiamidade.gov**  
@votemiamidade

February 2, 2026

Sandra McCready, MPA, MMC  
Town Clerk  
Town of Surfside  
9293 Harding Ave  
Surfside, FL 33154

Dear Mrs. McCready:

The Office of the Supervisor of Elections has completed the verification of the petitions for Donna Dayana Benmergui, a candidate for Commissioner for Town of Surfside. A total of 5 petitions were submitted. Per your request, we were to review petitions until a total of 25 valid petitions were met. Therefore, a total of 5 were reviewed for verification; of which 5 were certified.

For purposes of signature verification, my office follows the directives given by the municipality. You are encouraged to ensure compliance with municipal charter or code requirements.

Please find the certification for the petition enclosed. Should you have any questions or concerns, please feel free to contact Michelle McClain, Deputy Supervisor of Elections for Voter Services at 305-499-8302.

Best Regards,

Jose Ponce  
Chief Deputy Supervisor of Elections  
Office of the Supervisor of Elections

Enclosure

Alina Garcia  
Supervisor of Elections  
  
2700 NW 87th Ave  
Miami, FL 33172



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## CERTIFICATION

### Batch 2

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, Alina Garcia, Supervisor of Elections of Miami-Dade, Florida, do hereby certify that 5 signatures submitted by Donna Dayana Benmergui for the office of Commissioner for the Town of Surfside matched the signatures on the voter files.

WITNESS MY HAND  
AND OFFICIAL SEAL, AT  
MIAMI, MIAMI-DADE  
COUNTY, FLORIDA,  
ON THIS 2<sup>nd</sup> DAY OF  
FEBRUARY, 2026



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Jose Ponce  
Chief Deputy Supervisor of Elections



**TOWN OF SURFSIDE**  
**Office of the Town Clerk**

MUNICIPAL BUILDING  
9293 HARDING AVENUE  
SURFSIDE, FLORIDA 33154-3009

Telephone: 305 861-4863

Sandra N. McCready, MPA, MMC,  
Town Clerk

February 2, 2026

Donna Dayana Benmergui  
9149 Froude Avenue  
Surfside, FL 33154

Dear Ms. Benmergui:

I am pleased to inform you that according to records on file in this office, you have qualified as a candidate for the office of the Town Commission for the Town of Surfside. Your name will be placed on the ballot for the March 17, 2026, Municipal Election.

Congratulations on your qualification and if I can assist in any way throughout the process, please feel free to contact me.

Very truly yours,

A handwritten signature in blue ink that reads "Sandra N. McCready".

Sandra N. McCready, MPA, MMC  
Town Clerk