

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

JAN 2 AM 10:55

Sme

I, Tina Paul,

candidate for the office of Mayor;

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

X



Signature of Candidate

January 2, 2026

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 2 AM 10:55

gme

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)

Tina Frances Paul

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

9225 Collins Avenue
Surfside, FL 33154

4. Telephone:

(305) 608-5570

5. Candidate's Voter Registration #:

119278085

(not required for qualifying purposes)

6. Email Address:

tinafpaul@gmail.com

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

Mayor

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:

Tina Paul

12. Telephone:

(305) 608-5570

13. Email Address:

tinafpaul@gmail.com

14. Mailing Address:

9225 Collins Ave

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: January 2, 2026

26. Signature of Candidate:

X *Tina Paul*

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

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

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date: January 2, 2026

29. Signature of Campaign Treasurer or Deputy Treasurer

X *Tina Paul*

APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

JAN 2 AM 10:55

gmc

JAN 5 PM 2:27

gmc

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

Tina Frances Paul

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

9225 Collins Avenue
Surfside, FL 33154

4. Telephone:

(305) 608-5570

5. Candidate's Voter Registration #:

119278085

(not required for qualifying purposes)

6. Email Address:

tinafpaul@gmail.com

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Mayor

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☒ Campaign Treasurer

☐ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Tina Paul

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(305) 608-5570

13. Email Address:

tinafpaul@gmail.com

14. Mailing Address:

9225 Collins Ave

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:

Bank of America

20. Address:

1108 Kane Concourse

21. City:

Bay Harbor Islands

22. County:

Miami-Dade

23. State:

FL

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: January 2, 2026

26. Signature of Candidate:

X Tina Paul

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

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

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date: January 2, 2026

29. Signature of Campaign Treasurer or Deputy Treasurer

X Tina Paul



Town of Surfside

9293 Harding Avenue
Surfside, FL 33154

2026 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate Tina Paul
Office Sought Mayor
Phone No.: 305.608.5570 Cell Phone No: same
E-Mail Address: tinafpaul@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>1/2/2026</u> <u>1/5/2026</u>	<u>TP</u>
Nominating Petition	_____	_____
Statement of Candidate	<u>1/2/2026</u>	<u>TP</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

1/5/2026

78

3. Campaign Activities Memorandum

1/5/2026

78

Candidate's Signature

Date



TOWN OF SURFSIDE

MUNICIPAL BUILDING
9293 HARDING AVENUE
SURFSIDE, FLORIDA 33154

GENERAL ELECTION – MARCH 17, 2026

RECEIPT OF DOCUMENTS

Candidate:

Tina Paul
First Name Middle Name Last name

Mayor
Office Sought (Mayor or Commissioner)

Phone No.: 305 - 608 - 5570

Cell Phone: Same

E-Mail Address: tinafpaul@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:

[Signature]
Candidate Signature

Date: JANUARY 5, 2026



JAN 23 PM 1:55

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 }

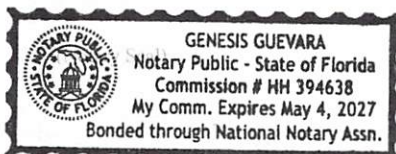
TOWN OF SURFSIDE }

I solemnly swear (or affirm) under oath, that my name is Tina Paul,
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 9225 Collins Ave,
my occupation is Photographer / Archivist; that I have been
a resident of the Town of Surfside since 2011; 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 Mayor
(Mayor or Commissioner) of the Town of Surfside, if elected.

Tina Paul
Signature of Candidate

1.23.26
Date

Sworn to and subscribed before me this 23rd day of January, 20 26.



Genesis Guevara
NOTARY PUBLIC
Genesis Guevara
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 23 PM 1:58

OFFICE USE ONLY

Candidate OathName to appear on ballot: Tina Paul

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 Mayor, , ,
(Office) (District #)
 , ; I am a qualified elector of 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 Tina Paul (305) 608-5570 tinafpaul@gmail.com
Signature of Candidate Telephone Number Email Address
9225 Collins Ave Surfside FL 33154
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF Miami-Dade

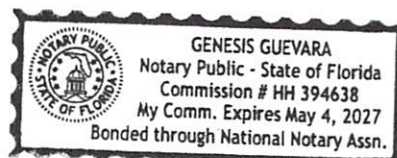
Sworn to (or affirmed) and subscribed before me by means of
online notarization ☐ OR physical presence ☒
this 23 day of January, 2026.

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced:

Genesis Guevara
Signature of Notary Public

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



2025 Form 1 - Statement of Financial Interests

Filed with COE: 01/21/2026

General Information

Name: Ms Tina Paul

PID 264581

AGENCY INFORMATION

Organization	Suborganization	Title
Town of Surfside	Mayor And Town Commission	Vice Mayor

CANDIDATE FOR

Position	Agency Name	Position sought or held
Mayor for a City, Town or Village - Form 1 (Effective 6/10/2024)	Town of Surfside	Mayor

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
Photography	9225 Collins Ave, #512 Surfside	licensing, service, sales
Nationwide Planning Asoc.	32-16 Broadway, Fair Lawn NJ	Stock Dividends, IRA Distributions

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
N/A

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
Stocks and IRAs	Nationwide Planning Associates
Beneficiary Accounts	Equitable, Voya Financial

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
Miami-Dade Housing and Community Development	701 NW 1 Court, 14 floor Miami FL 33136

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

Training

This section applies only to an appointed school superintendent, an elected municipal officer, elected local officer of an independent special district or a commissioner of a community redevelopment agency created under Part III, Chapter 163, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☒ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Filer

Tina Paul

Digitally signed: 01/21/2026

Filed with COE: 01/21/2026

TINA PAUL, CAMPAIGN

9225 COLLINS AVE APT 512
SURFSIDE FL 33154-3005

1001

DATE Jan, 23, 2026

63-4/630 FL
1035

**PAY TO THE
ORDER OF**

Town of Surfside

\$ 25.00

Twenty five and ^{xx}/₁₀₀

DOLLARS



Security
Features
Details on
Back

BANK OF AMERICA 

ACH R/T 063100277

FOR

qualifying fee

Tina Paul

NP

TOWN OF SURFSIDE

9293 Harding Ave.
SURFSIDE, FL 33154

Receipt

No 155458

RECEIVED OF

Tina Paul, Campaign

DATE

1-23-2020

Twenty Five ⁰⁰/₁₀₀

DOLLARS \$

25.00

HOW PAID

CASH

☐

CHECK

☒

CHECK #

☐

MONEY
ORDER

☐

CREDIT
CARD

☐

EXECUTIVE

☐

POLICE

☐

PARK &

RECREATION

☐

OTHER

☐

BY



THANK YOU

#1001

Qualifying Fee

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

JAN 23 PM 1:50

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Tina Paul for the office of Mayor (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>Amelia Z. Ayala</u>	Date: <u>1/5/26</u> D.O.B. [REDACTED]
Print Name: <u>ARILENE Z. AYALA</u>	Address: [REDACTED]
Signature: <u>Rosemary Karukin</u>	Date: <u>1/5/26</u> D.O.B. [REDACTED]
Print Name: <u>ROSEMARY KARUKIN</u>	Address: [REDACTED]
Signature: <u>Michael Karukin</u>	Date: <u>1/5/2026</u> D.O.B. [REDACTED]
Print Name: <u>MICHAEL KARUKIN</u>	Address: [REDACTED]
Signature: <u>Mathews Dias</u>	Date: <u>1/5/26</u> D.O.B. [REDACTED]
Print Name: <u>Mathews Dias</u>	Address: [REDACTED]
Signature: <u>Andrew Roth</u>	Date: <u>01-06-26</u> D.O.B. [REDACTED]
Print Name: <u>ANDREW ROTH</u>	Address: [REDACTED]
Signature: <u>Gloria Asher</u>	Date: <u>1/6/26</u> D.O.B. [REDACTED]
Print Name: <u>GLORIA ASHER</u>	Address: [REDACTED]
Signature: <u>Joel Thorne</u>	Date: <u>1/6/26</u> D.O.B. [REDACTED]
Print Name: <u>JOEL THORNE</u>	Address: [REDACTED]
Signature: <u>Brian Bey</u>	Date: <u>1-6-26</u> D.O.B. [REDACTED]
Print Name: <u>Brian Bey</u>	Address: [REDACTED]
Signature: <u>Gerardo Vildostegui</u>	Date: <u>1/6/26</u> D.O.B. [REDACTED]
Print Name: <u>Gerardo Vildostegui</u>	Address: [REDACTED]
Signature: <u>Barbara Cohen</u>	Date: <u>1-7-2026</u> D.O.B. [REDACTED]
Print Name: <u>BARBARA COHEN</u>	Address: [REDACTED]
Signature: <u>Doreen Lewin</u>	Date: <u>1-7-26</u> D.O.B. [REDACTED]
Print Name: <u>Doreen Lewin</u>	Address: [REDACTED]
Signature: <u>Marta Olchayik</u>	Date: <u>1-7-26</u> D.O.B. [REDACTED]
Print Name: <u>MARTA OLCHAYIK</u>	Address: [REDACTED]
Signature: <u>Amparo Rorbel</u>	Date: <u>01-07-2026</u> D.O.B. [REDACTED]
Print Name: <u>Amparo Rorbel</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: Tina Paul
Address of Circulator: 9225 Collins Ave Surfside FL 33154
Email address of Circulator: tinafpaul@gmail.com

ACCEPTANCE OF NOMINATION

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

Signature of Candidate: Tina Paul Date: 1.23.26

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

JAN 23 PM 1:50

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Tina Paul for the office of Mayor (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>[Signature]</u>	Date: <u>1/8/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Jeffrey L. Platt</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/8/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Marianne Melscheid</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/8/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>DAVID CHENG</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>01/08/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Evan K. Transmire</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>RICHARD STONE</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Aleida Delgado</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Jose L. Delgado</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Zachary Okhah</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Ariel Okhah</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>LOUISA K. Agresti</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Elizabeth Espinoza</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/9/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Valeria Valmana</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>01/11/2026</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>JAVIER VALMANA</u>	Address: <u>[Redacted]</u>

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Signature of Circulator: [Signature]
Address of Circulator: 9225 Collins Ave Surfside, FL 33154
Email address of Circulator: tinafpaul@gmail.com

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

Signature of Candidate: [Signature] Date: 1.23.26

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Signature: <u>[Signature]</u>	Date: <u>1-11-26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Lesbica Garcia Fraile</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/31/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>JOCELYN KINZIE</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/11/25</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>MITCHELL KINZER</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/11/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>MARCO WINER</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/11/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Daniela Tank</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1-11-26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Dorot Neuman</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1-17-26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Kristin Sanchez</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1-17-2026</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Pedro O. Sanchez</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/17/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>SCOTT J SHAMIS</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/17/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>PHYLIS SHAMIS</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/17/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Betta Logan</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/17/26</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>Yacly Santa</u>	Address: <u>[Redacted]</u>
Signature: <u>[Signature]</u>	Date: <u>1/19/2026</u> D.O.B. <u>[Redacted]</u>
Print Name: <u>RANDI MACBRIDE</u>	Address: <u>[Redacted]</u>

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: [Signature]

Address of Circulator: 9225 COLLINS AVE SURFSIDE FL 33154

Email address of Circulator: tinafpaul@gmail.com

ACCEPTANCE OF NOMINATION

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

Signature of Candidate: [Signature] Date: 1.23.26

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

JAN 23 PM 1:50

NOMINATING PETITION FOR MAYOR OR COMMISSIONER

TOWN OF SURFSIDE, FLORIDA

We the undersigned electors of the Town of Surfside, Florida, hereby nominate Tina Paul for
the office of Mayor (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>[Signature]</u>	Date: <u>1-19-26</u>	D.O.B.:
Print Name: <u>Fred V. MacBride Jr.</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>01/19/2026</u>	D.O.B.:
Print Name: <u>Ivete Pasini</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/19/26</u>	D.O.B.:
Print Name: <u>Cynthia Callaway</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/19/26</u>	D.O.B.:
Print Name: <u>Chris Callaway</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/19/26</u>	D.O.B.:
Print Name: <u>YACEL MAZLICH</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1-19-26</u>	D.O.B.:
Print Name: <u>Soledad A. B. Krasner</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1-19-26</u>	D.O.B.:
Print Name: <u>Thomas P. Krasner</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/26/2026</u>	D.O.B.:
Print Name: <u>Surfside Handyman</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/20/26</u>	D.O.B.:
Print Name: <u>Diane Kuharsky</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/20/26</u>	D.O.B.:
Print Name: <u>April B. Duff</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1-20-26</u>	D.O.B.:
Print Name: <u>Roger Fabelo</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1/22/26</u>	D.O.B.:
Print Name: <u>Benny Horn</u>	Address:	
Signature: <u>[Signature]</u>	Date: <u>1-22-26</u>	D.O.B.:
Print Name: <u>Dulce Quinones</u>	Address:	

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: [Signature]
Address of Circulator: 9225 Collins Ave Surfside FL 33154
Email address of Circulator: tinafpaul@gmail.com

ACCEPTANCE OF NOMINATION

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

Signature of Candidate: [Signature] Date: 1.23.26



Town of Surfside

9293 Harding Avenue
Surfside, FL 33154

2026 GENERAL MUNICIPAL ELECTION QUALIFYING PACKET

Name of Candidate Tina Paul
Office Sought Mayor
Phone No.: 305.608.5570 Cell Phone No: same
E-Mail Address: tinafpaul@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>1/2/2026</u> <u>1/5/2026</u>	<u>TP</u>
Nominating Petition	<u>1/23/2026</u>	<u>TP</u>
Statement of Candidate	<u>1/2/2026</u>	<u>TP</u>
Sworn Statement of Qualification	<u>1/23/2026</u>	<u>TP</u>
Candidate Oath	<u>1/23/2026</u>	<u>TP</u>
Form 1 – Statement of Financial Interest (2025)	<u>1/23/2026</u>	<u>TP</u>
Declaration and First Amendment Waiver Volunteer Statement of Fair Campaign Practice	<u> </u>	<u>TP</u>
Qualifying Fee \$25.00	<u>1/23/2026</u>	<u>TP</u>
L & A Schedule	<u>1/23/2026</u>	<u>TP</u>

2. Important Dates to Remember

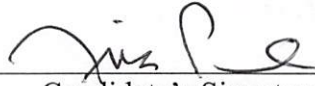
1/5/2026

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3. Campaign Activities Memorandum

1/5/2026

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Candidate's Signature

January 23, 2026

Date