STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

1. Full Name of Committee			Telephone	
One Surfside				
Mailing Address (include city	/, state and zip code)			
	,,,			
1018 B 71 ST Mign. Beach PC 33141				
Street Address (include city,	state and zip code)			
Same				
2. Affiliated or Connected Or committees)	ganizations (includes other committees of co	ntinuous ex	istence and political	
Name of Affiliated or Connected Organization	Mailing Address		Relationship	
None				
3. Area, Scope and Jurisdicti	ion of the Committee	THE TOTAL PROPERTY OF		
	se issues and/or candidates for municipal or county offic	ces, register v	oters, or other activity not	
prohibited by Chapter 106, Florida				
	Organization's Special Interest (e.g., medical,	legal, educ	ation, etc.)	
Community Issues/	Folitical			
		4 /:		
	and Position, the Custodian of Books and Ad	T		
Full Name	Mailing Address		mittee Title or Position	
Aaron Nevins	9715 W. Broward Blvd. #246	Treasu	ırer	
	Plantation, FL 33324			
DS DE 5 (Day 05/11) Puls 19 2 017				

6. List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)				
Full Name	Mailing Addr	ess	Committee Title or Position	
Jack Benveniste	10183 715	C	Chairma	n
	10183 71 57 . M. Ami Besel FC	23141		
	,			
	 	ation Each Candidate	or Other In	dividual that this
Full Name	Mailing Address	Office So	ought	Party
To be determined				
8. List Any Issues this Co	ommittee is Supporting: to be	determined		
List Any Issues this Co	mmittee is Opposing:	e determined		
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party N/A				
	ution, What Disposition will be anization that is tax e			7
	Deposit Boxes, or Other Depos	sitories Used for Com	mittee Fund	ds
Name of Bank or Dep	pository & Account Number	1	Mailing Addre	ess
Bank of America		901 SE 17th St Cswy Ste 100 Fort Lauderdale, FL 33316		
12. List all Reports Requi and Positions of Such	ired to be Filed by this Committ h Officials, If Any	tee with Federal Offici	ials and the	Names, Addresses
Report Title	Dates Required to be Filed	Name & Position of C	Official	Mailing Address
8871	upon formation	IRS		gden, UT
1120POL 990 as needed	3/15 annually 3/15 annually		84	201
	3/13 amuany			
STATE OF Florida		Miami-E	<u>Dade</u>	COUNTY
, Jack Benvenist	te	, certify that the info	ormation in th	his Statement of
Organization is complete, tr	rue and correct.			
x Oach	Bannut		09-01	-2023
Signature of the	Chairman of Political Committee			Date

1 Logordey

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN **DEPOSITORY FOR**

POLITICAL COMMITTEES (Sections 106.011(2) and 106.021(1), F.S.)

CHECK APPROPRIATE BOX: Initial Filing for: Primary Treasurer Deputy Treasurer			SEP 1 PH12:03
Tilliary Heastres Deputy Heastres			OFFICE USE ONLY
Re-filing to Change: Primary Treasurer Deputy Treasurer	Primary/Sec	condary Depository	
1. Committee		2. Telephone	
One Surfside		()	
3. Name of Treasurer or Deputy Treasurer 4. Email (optional) Aaron Nevins aaron@chelsea	-road.com	5. Telephone (o ₁ (754) 581-4	
6. Mailing Address 9715 W. Broward Blvd. #246 Plantation, FL 33324			
7. Street Address Same			
8. The following bank has been designated as the			
9. Name of Bank Bank of America	10. Street Add 901 SE 17	dress 7th St Cswy	
11. City Fort Lauderdale	12 F	2. State L	13. Zip Code 33316
14. Signature of Chairman X Jack Benner	15. Name of Jack Beny	Chairman (Print or Type veniste	e)
Campaign Treasurer's Ac	ceptance o	of Appointment	
Aaron Nevins (Please Print or Type)		, do hereb	y accept the appointment as
treasurer or deputy treasurer for	SUR-	nmittee)	
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HA ACCEPTANCE OF APPOINTMENT AND			
3/29/23 X	(A		200000000000000000000000000000000000000
Date	Signature of C	Campaign Treasurer or D	Deputy Treasurer

DS-DE 6 (Rev. 4/19)

OFFICE USE ONLY REGISTERED AGENT STATEMENT OF APPOINTMENT (Section 106.022, F.S.) ✓ Original Appointment Change of Appointment Change of Physical Address Change of Mailing Address Registered Agent and Office Information Telephone Name Aaron Nevins Street Address 9715 W. Broward Blvd #246 State Zip Code City Plantation FL 33324 Mailing Address Same State Zip Code City I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer. 9-1-23 Signature of Registered Agent Date Former Registered Agent and Office Information (for changes only) Telephone Name Street Address City State Zip Code **Committee or Organization Information** Name of Committee or Organization One Surfside Street Address Telephone 1017B 71 St City Zip Code 33141 Signature of Chairperson 9-1-23 JACK Benjenste Printed Name of Chairperson Date

One Surfside 1018B 71st Street Miami Beach, FL 33141

October 1, 2023

TOWN OF SURFSIDE

00T4 '23 12:24PM

Sandra N. McCready, MPA, MMC Town Clerk, Town of Surfside Florida 9293 Harding Avenue Surfside, Florida 33154

Re: One Surfside Political Committee

Dear Clerk McCready:

Please be advised that, effective immediately, I am resigning from the position of Chairperson for the above-referenced Political Committee. Aaron Nevins has been appointed to the position of Chairperson.

Mr. Nevins Acceptance of the appointment is included. Please update the City's records accordingly. Thank you for your assistance in this matter.

Sincerely,

Jack Benveniste, Chairman

One Surfside 1018B 71st Street Miami Beach, FL 33141

October 1, 2023

TOWN OF SURFSIDE

OCT4 '23 12:25PM

Sandra N. McCready, MPA, MMC Town Clerk, Town of Surfside Florida 9293 Harding Avenue Surfside, Florida 33154

Re: One Surfside Political Committee

Dear Clerk McCready:

I hereby accept the appointment of the position of Chairman for the above referenced Political Committee. Please update the City's records accordingly. Thank you for your assistance in this matter.

Sincerely,

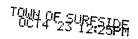
AASON NOVINS

	CAMPAIGN TREASURE	R'S REPORT SUMMARY			
(1)	One Surfside	OFFICE USE ONLY			
	Name				
(2)	9715 W. Broward Blvd. #246 Address (number and street)	TOWN OF SURFSIDE			
	Plantation, FL 33324	0CT4 '23 12:25PM			
	City, State, Zip Code				
	✓ Check here if address has changed	(3) ID Number:			
(4)	Check appropriate box(es):				
	 ☐ Candidate Office Sought: ☑ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 	☐ Check here if PC or ECO has disbanded☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed			
-	(5) Report	Identifiers			
Cov	er Period: From $07 / 01 / 23$ To	09 / 30 / 23 Report Type: Q3			
	Original Amendment Spe	ecial Election Report			
(6)	Contributions This Report	(7) Expenditures This Report			
Cas	h & Checks \$ 0 , ,	Monetary			
Loa	ns \$ <u>0</u> , ,	Transfers to Office Account \$ 0 , ,			
Tota	al Monetary \$ <u>0</u> , ,	Total Monetary \$ 0 , .			
In-K	ind \$, , 45.86				
		(8) Other Distributions \$ 0 , ,			
(9)	TOTAL Monetary Contributions To Date \$, , 45.86	(10) TOTAL Monetary Expenditures To Date			
	(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)				
1	certify that I have examined this report and it is true, corr	·			
	Type name) ARM DUCC Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) AARAN NOU (N.S. □ Candidate			
		V			
<u> </u>	ignature	X			

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Surtaide			(2) I.D. Number	00T4 '23	12:2588
(3) Cover Period	d / / / 23	throu	gh /	23 / 23	_ (4) Page	1 (of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
9/14/2023 / / / :	Chelses Poad Consulting 9715 W. Browerd Blwd. 246 Plantation, FL 33324	-		INK	Wobaite/emai		S 45.86
1 1							
1 1	-						
1 1	-						
1 1	_						
1 1	_						
1 1							

DS-DE 13 (Rev. 11/13)



CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES 1) Name One Surfaide (2) I.D. Number					
(3) Cover Perio	od ⁰⁷ / ⁰¹ / ²³ through ⁰⁹	<u>/3c/23</u> (e	4) Page	of _	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)
//	NONE				
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

WAIVER OF REPORT

(Section 10	6.07(7), F.S.)	JAN 8 PH 3:10			
(PLEAS	E TYPE)	OFFICE USE ONLY			
One Surfside					
Nai	me	Offic	ce Sought		
9715 W Broward Blvd. #	‡ 246	Plantation, FL 33324			
Addi		City	State Zip Code		
Candidate	Political Committee	Party Execut	ive Committee		
NOTE: This form does not apply to an electioneering communications organization (ECO). An ECO must file a report (not a waiver) that no reportable contributions or expenditures were made during the reporting period (s. 106.0703(6), F.S.).					
Check here if address has changed since last report. Check here if PC has DISBANDED and will no longer file reports.					
TYPE OF REPORT	Γ (Check Appropriate Box	and Complete Applicab	le Line beneath Box)		
MONTHLY REPORT	PRIMARY ELECTION	GENERAL ELECTION	■ OTHER REPORT TYPE		
Indicate report #	Indicate report #	Indicate report #	Indicate report type and # as applicable: 2023 Q4		
	☐ TERMINATION REPORT	☐ SPECIAL ELECTION			
NOTIFICATION OF	NO ACTIVITY IN CAMPAIGN	ACCOUNT FOR THE RE	PORTING PERIOD OF		
10/1/23	THRO	ugн 12/31/23			
x //C		- //	4/74		
	Signature	1	Date		
X			4/24		
	Signature		Date		
Candidates: Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Political Committees: Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)					
Except as noted above for an ECO, in any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.					

WAIVER OF REPORT (Section 106.07(7), F.S.)

TOWN OF SURFSIDE

(Section 100.07(7), F.S.)			JAN19	'24 10:15AM	
(PLEASE TYPE)		OFFICE USE ONLY			
One Surfside					
Name		Office	Sought		
9715 W Broward Blvd. #246	PI	Plantation, FL 33324			
Address	C	ity	State	Zip Code	
Candidate Political C	ommittee	Party Executive	e Committee		
NOTE: This form does not apply to an election waiver) that no reportable contributions					
Check here if address has changed since last report. Check here if PC has DISBANDED and will no longer file reports.					
TYPE OF REPORT (Check Ap	propriate Box and	Complete Applicable	Line beneath	Box)	
MONTHLY REPORT PRIMAI	RY ELECTION	GENERAL ELECTION	OTHER REP	ORT TYPE	
Indicate report # Indicate rep M		licate report #	Indicate report as applicable:		
☐ TERMIN	IATION REPORT	SPECIAL ELECTION			
NOTIFICATION OF NO ACTIVIT	TY IN CAMPAIGN AC	COUNT FOR THE REPO	ORTING PERIOD	OF	
01/01/24	THROUGH	01/12/24			
X		1/	18/24		
Signature			Date		
X		J/1	8/24		
Signature			Date		
Candidates: Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Political Committees: Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.) Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)					
Except as noted above for an ECO, in any repo received) the filing of the required report is v repo		ing officer must be notified in			

	CAMPAIGN TREASURE	R'S REPORT SUMMARY		
(1)	One Surfside	OFFICE USE ONLY		
	Name			
(2)	9715 W. Broward Blvd. #246			
	Address (number and street) Plantation, FL 33324	TOWN OF SURFSIDE		
	City, State, Zip Code	FEB2 '24 11:14AII		
	Check here if address has changed	(3) ID Number:		
(4)	Check appropriate box(es):			
		☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed		
	(5) Report	Identifiers		
Cov	er Period: From 01 / 13 / 24 To	01 / 26 / 24 Report Type: 2024B1		
	Original Amendment Spe	ecial Election Report		
(6)	Contributions This Report	(7) Expenditures This Report		
Cas	h & Checks \$ <u>20,5,00</u> ,	Monetary		
Loai	s s s s s s s s s s s s s s s s s s s	Transfers to Office Account \$ 0 , , .		
Tota	al Monetary \$ <u>0</u> , ,	Total Monetary \$ 0 , , .		
ln-K	ind \$,,			
		(8) Other Distributions \$ 0 , ,		
(9)	TOTAL Monetary Contributions To Date \$ 20545.86 ,	(10) TOTAL Monetary Expenditures To Date \$ 46.01 , ,		
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)				
1 (certify that I have examined this report and it is true, corr	, , , , , , , , , , , , , , , , , , ,		
_(1	_{Type name)} Aaron Nevins	_(Type name) Aaron Nevins		
_	Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer relectioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)		
.		V		
<u> </u>	ignature	Signature		

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name One S	urfside			(2)	I.D. Number	LERS Z	4 11:14HM
(3) Cover Period	01 / 13 / 24	through _	1 / <u>26</u>	/	_ (4) Page	1	of
(5) Date	(7) Full Name	(8)		(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Contribu	I	Contribution	In-kind		_
Number 01 18 24 / /	City, State, Zip Code Chelsea Road Consulting 9715 W. Broward Blvd. 246 Plantation, FL 33324		upation	Туре : не	Description	Amendment	Amount 500.00
, <u>-</u>	Floridians Together	-				<u>-</u>	
24 24	for Change	F Polit	cical Cm C	не			20,000.00
			<u> </u>		_		
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1 1						-	
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

d <u>01 / 13 / 24</u> through <u>01</u>	_/_26 /_24 (4	4) Page	of _	1
(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount
Harland Clarke 15955 La Cantera Pkwy San Antonio, TX, 78256-2589	Check Order	MON		\$46.01
		-		
	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code Harland Clarke 15955 La Cantera Pkwy	Full Name (Last, Suffix, First, Middle) Street Address & (add office sought if contribution to a candidate) Harland Clarke 15955 La Cantera Pkwy	(7) Full Name (Last, Suffix, First, Middle) Street Address & (add office sought if contribution to a candidate) Harland Clarke 15955 La Cantera Pkwy San Antonio, TX, 78256-2589	(7) Full Name (Last, Suffix, First, Middle) Street Address & (add office sought if contribution to a candidate) Harland Clarke 15955 La Cantera Pkwy San Antonio, TX, 78256-2589 (8) Purpose (add office sought if contribution to a candidate) Expenditure Type Amendment

	CAMPAIGN TREASURE	R'S REPORT SUMMARY		
(1)	One Surfside	OFFICE USE ONLY		
	Name			
(2)	9715 W. Broward Blvd. #246 Address (number and street)	FEB 6 AM11:18		
	Plantation, FL 33324	SOK I		
	City, State, Zip Code	17.		
	Check here if address has changed	(3) ID Number:		
(4)	Check appropriate box(es):			
	 ☐ Candidate Office Sought: ☑ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 	Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed		
	(5) Report	Identifiers		
Cov	er Period: From 01 / 13 / 24 To	01 / 26 / 24 Report Type: 2024B1		
	riginal	ecial Election Report		
(6)	Contributions This Report	(7) Expenditures This Report		
Cas	h & Checks \$ 20,000 ,	Monetary Expenditures \$ 0 , ,		
Loar	s <u>0</u> , ,	Transfers to Office Account \$ 0 , , .		
Tota	I Monetary \$ <u>0</u> , ,	Total Monetary \$ 0 ,		
In-K	ind \$,,			
		(8) Other Distributions \$ _0 , ,		
(9)	TOTAL Monetary Contributions To Date \$ 20545.86 ,	(10) TOTAL Monetary Expenditures To Date \$ 46.01 , ,		
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) I certify that I have examined this report and it is true, correct, and complete:				
	ype name) Aaron Nevins	(Type name) Aaron Nevins		
	Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)		
х		X		
	gnature	Signature		

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	One Surfside	e				(2)	I.D. Number		- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
(3) Cover F	Period 01	/ 13	/ 24	through 01.	/ ²⁶	/ 24	(4) Page	1	of ¹

	(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
	(6)	(Last, Suffix, First, Middle)			_			
	Sequence Number	Street Address & City, State, Zip Code	Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
-			туре	Occupation	туре	Description	- Amendment	Amount
01	24 24 / /	Floridians Together for Change						
2			F	Political Cm	CHE		DEL	\$20,000
<u> </u>				•			-	
01	24 24	Floridians Together for Change						
3	, ,	9715 West Broward Boulevard	F	Political Cm	CHE		ADD	\$20,000
		#246 Plantation, FL 33324						
				8				
	1 1	+						
<u> </u>	1 1	4						
	1 1	1						
	1 1	1						
	1 1							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name One Surfside (2) I.D. Number (2) I.D. Number							
(3) Cover Perio	od ⁰¹ / ¹³ / ²⁴ through ⁰¹	/ ²⁶ / ²⁴ (4	4) Page	of _			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)		
/ /	NONE						
				_			
/ /							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURE	R'S REPORT SUMMARY
One Surfside	OFFICE USE ONLY
Name	
(2) 9715 W. Broward Blvd. #246 Address (number and street)	TOWN OF SURFSIDE
Plantation, FL 33324	FEB16 '24 12:25PM
City, State, Zip Code	Sme
Check here if address has changed	(3) ID Number:
(4) Check appropriate box(es):	
 ☐ Candidate Office Sought: ☑ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an 	 ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed
individual making electioneering communications)	
(5) Repor	t Identifiers
Cover Period: From 01 / 27 / 24 To	02 / 09 / 24 Report Type: 2024B2
✓ Original	ecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$ 0 , ,	Monetary \$ 8850 ,
Loans \$ <u>0</u> , ,	Transfers to Office Account \$ 0 , , .
Total Monetary \$ 0 , ,	Total Monetary \$ 0 ,
In-Kind \$, ,	
	(8) Other Distributions \$ 0 , ,
(9) TOTAL Monetary Contributions To Date \$ 20545.86	(10) TOTAL Monetary Expenditures To Date \$ 8896.01,
	tification son to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, cor	rect, and complete:
(Type name) Aaron Nevins	(Type name) Aaron Nevins
☐ Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)
X	x
Signature	Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS SURFSIDE

(1) Name	urfside			I.D. Number	EB16 '24 2024B2	12:25PM
(3) Cover Period	01 / 27 / 24	through /	09 / 24	_ (4) Page	1	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
<u> </u>	NONE					
				-		
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES '24 12:25PM

(1) Name One Surfside	(2) I.D. Number ^{2024B2}
(3) Cover Period ⁰¹ / ²⁷ / ²⁴ through ⁰² / ⁰⁹ / ²⁴	(4) Page of

(5)	(7)	(8)	(9)	(10)	(11)
Date	Full Name	Purpose			
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
01 / 31/ 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	MON		\$3700
02 / 05 / 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	MON		\$5150
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	One Surfside	OFFICE USE ONLY
	Name	
(2)	9715 W. Broward Blvd. #246 Address (number and street)	TOWN OF SURFSIDE
	Plantation, FL 33324	FEB23 '24 12:06PM
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number:
(4)	Check appropriate box(es):	
	 ☐ Candidate Office Sought: ☑ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed
	(5) Report	Identifiers
Cov	er Period: From 02 / 10 / 24 To	02 / 22 / 24 Report Type: 25P1
✓ C	Original Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
Cas	h & Checks \$ 0 , ,	Monetary Expenditures \$ 1915,
Loai	s , ,	Transfers to Office Account \$ 0 , , .
Tota	Il Monetary \$ 0 , ,	
In-K	ind \$ 300 , ,	Total Monetary \$ 1915 ,
		(8) Other Distributions \$ 0 , ,
(9)	TOTAL Monetary Contributions To Date \$ 20,845,86 ,	(10) TOTAL Monetary Expenditures To Date \$ 10,811,01 ,
	(11) Cert It is a first degree misdemeanor for any perso	
lo	certify that I have examined this report and it is true, corre	ect, and complete:
(T	ype name) Aaron Nevins	(Type name) Aaron Nevins
	Individual (only for IE	☐ Candidate ☑ Chairperson (only for PC and PTY)
X	gnature	Signature

TOWN OF SURFSIDE FEB23 '24 12:06PM

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	urtside		(2)	I.D. Number	25P1	
(3) Cover Period	02 / 10 24	through /	/	_ (4) Page	1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
02 20 24 / / 1	Chelsea Road Consulting 9715 W Broward Blvd #246 Plantation, FL 33324	INK Consulting		food for vol		\$300.00
1 1						
1 1						
1 1						
1 1						
1 1						
1 1						

DS-DE 13 (Rev. 11/13)

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FEB23 '24 12:07PM

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name One Surfs	ide						-				(2) I.D. Number ²⁰	024B2	
(3) Cover Period 02	/	10	_/_	24	through	02	_/_	22	_/_	24	(4) Page	of	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
02 / 19/ 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	ECC		\$1915
//					
/ /					
/ /					
/ /					
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	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	One Surfside	OFFICE USE ONLY
(2)	Name 9715 W. Broward Blvd. #246	TOWN OF SURFSIDE
	Address (number and street) Plantation, FL 33324	FEB23 '24 12:07Pm
	City, State, Zip Code	17:8/5/
	Check here if address has changed	(3) ID Number:
(4)	Check appropriate box(es): ☐ Candidate Office Sought: ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed
	(5) Report	Identifiers
Cov	er Period: From 01 / 27 / 24 To	02 / 09 / 24 Report Type: 2024B2
□ c	original	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
Cas	h & Checks \$ 0 , ,	Monetary \$ 8850 ,
Loai	s <u>0</u> , ,	Transfers to Office Account \$ 0 , , .
Tota	al Monetary \$ <u>0</u> , ,	Total Monetary \$ 0 , ,
In-K	ind \$, ,	(8) Other Distributions \$ 0 , ,
(9)	TOTAL Monetary Contributions To Date \$ 20545.86	(10) TOTAL Monetary Expenditures To Date \$ 8896.0,1
	It is a first degree misdemeanor for any pers	tification on to falsify a public record (ss. 839.13, F.S.)
	certify that I have examined this report and it is true, con	
	ype name) Aaron Nevins Individual (only for Is Treasurer Deputy Treasurer electioneering comm.)	(Type name) Aaron Nevins ☐ Candidate ☐ Champerson (only for PC and PTY)
X	ignature	X Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS 124 12:07PM

(1) Name One S	urfside	(2)	(2) I.D. Number				
(3) Cover Period	01	throug	h /)9 / <u>24</u>	_ (4) Page	1	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		(8) ntributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12)
/ /	NONE						
1 1							
1 1				6			
1 1							
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1 1							
1 1							

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FEB23 '24 12:07PMA

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name One Surfsid	е										(2) I.D. Number ²⁰	24B2	
(3) Cover Period 01	_/_	27	_/_	24	through	02	/_	09	_/_	24	(4) Page	of	

(5)	(7)	(8)	(9)	(10)	(11)
(5) Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	
01 / 31/ 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	MON	DELETE	\$3700
02 / 05 / 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	MON	DELETE	\$5150
01 / 31 / 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	ECC	ADD	\$3700
02 05 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	ECC	ADD	\$5150
/ /					
/ /					
/ /					
//					

	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	One Surfside	OFFICE USE ONLY
	Name	TOWN OF SURFSIDE
(2)	9715 W. Broward Blvd. #246	
	Address (number and street) Plantation, FL 33324	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number: MARS '24 10:51AM (1)
(4)	Check appropriate box(es):	THE STATE OF THE S
	 ☐ Candidate Office Sought: ☑ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 	 ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed
	(5) Report	Identifiers
Cov	er Period: From 02 / 23 / 24 To	03 / 07 / 24 Report Type: 11P1
✓ C	Original Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
Cas	h & Checks \$ 4000 ,	Monetary
Loa	s <u>0</u> , ,	Transfers to Office Account \$ 0 , , .
Tota	al Monetary \$ 4000 ,	Total Monetary \$ 12,068.70 , .
In-K	ind \$ <u>0</u> , ,	
		(8) Other Distributions \$ 0 , ,
(9)	TOTAL Monetary Contributions To Date \$ 24,845,86 ,	(10) TOTAL Monetary Expenditures To Date \$ 22,879,71 ,
		rtification son to falsify a public record (ss. 839.13, F.S.)
1	certify that I have examined this report and it is true, cor	
_(7	_{Type name)} Aaron Nevins	(Type name) Aaron Nevins
	Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☑ Chairperson (only for PC and PTY)
Х	//2	X
	ignature	Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name One S	urfside			(2)	I.D. Number	11P1	
(3) Cover Period	02 / 23 / 24	throu	gh/	07 / 24	_ (4) Page	1	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Co	(8)	(9) Contribution	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
02 26 24 / /	Inspiration Museum INC 3751 RENEE DR. STE 141 Myrtle Beach, SC 29579	В	SEO	СНЕ			\$4000
1 1							
				-	TOL	IN OF SURF	SIDE 8:51AM PK
1 1						24 1	9:51AM PK
1 1							
I I							
1 1							
1 1							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES SURFSIDE

(1) Name One Surfside	9						(2) I.D. Number 114	AR8 '24 10:5	18M/
(3) Cover Period ⁰²	/ 23	/ 24	through 03	 07	_/_	24	(4) Page ¹	of 1	PK

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
02 / 28/ 24	SINGLETON CONSULTING 12015 Bridgehampton Rd, Jacksonville, FL, 32218, US	Digital Billboard truck	ECC		\$6500
03 / 04 / 24	AddInSolutions Inc. 10545 Grove Lane Cooper City, FL 33328	Text Messages	ECC		\$450.70
03 /04 / 24	Mark Graphics 4230 Oak Circle Boca Raton, FL 33431	Direct Mail	ECC		\$3100
03 07 24	Chelsea Road Consulting 9715 W. Broward Blvd. #246 Plantation, FL 33324	Digital Advertising	ECC		\$2018
/ /					
/ /					
//					
//					

	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	One Surfside	OFFICE USE ONLY						
(2)	Name 9715 W. Broward Blvd. #246							
))	Address (number and street) Plantation, FL 33324	MAR15 '24 3:15PM						
	City, State, Zip Code	Smo						
	Check here if address has changed	(3) ID Number:						
(4)	Check appropriate box(es):							
	□ Candidate Office Sought: ☑ Political Committee (PC) □ Electioneering Communications Org. (ECO) □ Check here if PC or ECO has disbanded □ Party Executive Committee (PTY) □ Check here if PTY has disbanded □ Independent Expenditure (IE) (also covers an individual making electioneering communications) □ Check here if no other IE or EC reports will be filed							
	(5) Report	Identifiers						
Cove	er Period: From 03 / 08 / 24 To	03 / 15 / 24 Report Type: 4P1						
✓ 0	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	n & Checks \$ <u>0</u> , ,	Monetary Expenditures \$ 1000.00 ,						
Loar	s <u>0</u> , ,	Transfers to Office Account \$ 0 , , .						
Tota	I Monetary \$ <u>0</u> , ,	Total Monetary \$ 1000.00 , .						
In-K	ind \$0 , , .	, , , , , , , , , , , , , , , , , , , ,						
		(8) Other Distributions \$ 0 , ,						
(9)	TOTAL Monetary Contributions To Date \$ 24,845,86 ,	(10) TOTAL Monetary Expenditures To Date \$ 23,379,71						
		tification on to falsify a public record (ss. 839.13, F.S.)						
10	certify that I have examined this report and it is true, corr	rect, and complete:						
(T	ype name) Aaron Nevins	(Type name) Aaron Nevins						
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
х		X						
27	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name One Surfside		(2) I.D. Number ^{4P1}
(3) Cover Period ⁰³ /	⁰⁸ / ²⁴ through ⁰³ / ¹⁵ / ²⁴	(4) Page 1 of 1

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
03 / 08/ 24	Nieves Fenichel 1568 Washington Avenue Apt 24 Miami Beach, FL 33139	Early Voting Canvassing	MON		\$500
03 / 15 / 24	Nieves Fenichel 1568 Washington Avenue Apt 24 Miami Beach, FL 33139	Early Voting Canvassing	MON		\$500
/ /					
/					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

MAR15 '24 3:15PM

(1) Name One S	urfside		(2)	I.D. Number	4P1	
(3) Cover Period	03 / 08 / 24	through /	15 / 24 /	_ (4) Page	1	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type .	(10) In-kind Description	(11)	(12)
1 1	None	уро	1,7,50	Beschpton		Amount
1 1						
1 1						
1 1						
I I						
1 1						
1 1						

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One Surfside PC

MEMORANDUM - VIA ESTABLE TABLE

TO:

Clerk, City of Surfside

FROM:

Aaron Nevins, Chair - One Surfside PC

DATE:

April 4, 2024

SUBJECT:

Q1 2024 report for One Surfside PC

Madame Clerk: Please find attached the report for the first quarter of 2024 for the One Surfside PC. Pursuant to Florida Statute s. 106.0703, "Quarterly reports must include all contributions received and expenditures made during the calendar quarter that have not otherwise been reported pursuant to this section."

Therefore, due to all previous contributions and expenditures having been previously reported, the attached waiver essentially reflects the period from 3/16/24 to 3/31/24. Please don't hesitate to contact me with any questions.

Yours sincerely,

Aaron Nevins, Chairman

One Surfside

APR 5 113

WAIVER OF REPORT

(Section 106.07)	(7), F.S.)		on 106.07(7), F.S.) HPR 5 PM 1:18		M 1:18
(PLEASE TY	PE)		OFFIC	E USE ONLY	
One Surfside					
Name			Office	Sought	
9715 W Broward Blvd. #246	3	Plantation,	FL 33324		
Address		City		State	Zip Code
Candidate NOTE: This form does not apply to waiver) that no reportable con				CO must file a rep	
Check here if address has char	nged since last report.	Check here reports.	if PC has DISB/	ANDED and will no	longer file
TYPE OF REPORT (C	heck Appropriate Box a	and Comple	te Applicable	E Line beneath	Box)
MONTHLY REPORT	PRIMARY ELECTION	GENERA	L ELECTION	OTHER REI	PORT TYPE
Indicate report # Indicate F	dicate report #	Indicate repo	rt#	Indicate report as applicable: 2024 Q1	type and #
	TERMINATION REPORT	☐ SPECIAL	ELECTION		
NOTIFICATION OF NO	ACTIVITY IN CAMPAIGN	ACCOUNT F	OR THE REPO	ORTING PERIO	O OF
1/1/2024 (up to 3/16/2	previously reported) THROU	JGH <u>3/31/2</u>	24		
x /			4/4/24		
Sigr	ature			Date	
X			4/4/24		
Sigr	ature			Date	
P	andidates: Candidate and Campaign T olitical Committees: Chairman and Campaign Tr arty Executive Committees: Treasurer and Chairman (s.	easurer or Dep	uty Treasurer (s	. 106.07(5), F.S.)	xpended or
received) the filing of the required		e filing officer m	nust be notified in		

CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) One Surfside	OFFICE USE ONLY						
Name							
(2) 9715 W. Broward Blvd. #246 Address (number and street)	JUN 11 AM10:23						
Plantation, FL 33324							
City, State, Zip Code							
Check here if address has changed	(3) ID Number:						
(4) Check appropriate box(es):							
Candidate Office Sought:							
 ✓ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ✓ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 							
(5) Report	Identifiers						
Cover Period: From 04 / 01 / 2024 To	06 / 01 / 2024 Report Type: 2024-P1						
✓ Original Amendment Spe	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$ 0 , ,	Monetary \$ 620.29 ,						
Loans $$0$,,	Transfers to Office Account \$ 0 , , .						
Total Monetary \$ 0 , ,	Total Monetary \$ 620.29 , .						
In-Kind \$ 0 , ,							
	(8) Other Distributions						
	\$, ,						
(9) TOTAL Monetary Contributions To Date \$ 24845.86 ,	(10) TOTAL Monetary Expenditures To Date \$ 24500.00 ,						
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)							
I certify that I have examined this report and it is true, correct, and complete:							
(Type name) Aaron Nevins	_(Type name) Aaron Nevins						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X	X						
Signature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name One Surf	side							(2) I.D. Number	2024-P1	
(3) Cover Period $\frac{0}{2}$	4 /	01	2024	through __	06	01	/ 2024	(4) Page	of 1	

	(7)	(0)	1 (0)	140	(6.5)
(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
04 / 01/24	Bank of America 941 SE 17th St Fort Lauderdale, Fl 33316	Bank Fees	MON		16.00
04 / 19 / 24	Addin Solutions 10545 Grove Lane Cooper City, FL 33328	Text Messages	ECC		48.50
05 01 24	Bank of America 941 SE 17 St Fort Lauderdale, FL 33316	Bank Fees	мон		16.00
05 16 24	Chelsea Road Consulting 1000 W 145 0145 FH lavoerbole FC 33312	Bookkeeping	MON		539.79
/ /					
/ /					
//					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	urfside	(2) I.D. Number				
(3) Cover Period	04 / 01 / 2024	through 06 /	01 / 2024	_ (4) Page	1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1	NONE					
1 1						
1 1						
1 1						
1 1						
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1 1						

DS-DE 13 (Rev. 11/13)

One Surfside

9715 W Broward Blvd #246 Plantation, FL 33312

June 5, 2024

JUN 11 AM10:23

Sandra N. McCready, MPA, MMC Town Clerk, Town of Surfside Florida 9293 Harding Avenue Surfside, Florida 33154

Re: One Surfside Political Committee

Dear Clerk McCready:

Please accept this letter as a request to close the above mentioned political committee that is registered with your office. The committee has ceased activity as of May 31 as a PC and has dissolved as of this date.

Additionally, you will find attached the last campaign finance report for One Surfside. Please update the town's records accordingly.

Thank you for your assistance in this matter. If you have any questions please don't hesitate to contact me directly.

Sincerely,

Aaron Nevins, Chairman & Treasurer

One Surfside PC