APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

DS-DE 9 (Rev. 10/10)

2023 OCT 04 PM03:39

Rule 1S-2.0001, F.A.C.

| NOTE: This form must be on file with the qualifying officer before opening the campaign account. | | | | | OFFICE USE ONLY | | | | | | | |
|--|--|---|---------|-------------|---|--|---------------|-----------|-------------|-----------|-------|--|
| 1. CHECK APPROPRIATE BOX(ES): | | | | | | | | | | | | |
| Initial Filing of Form | | iling to Change: | □т | reasu | rer/Deputy | <u>/ </u> | Deposito | ory 🗌 | Office | □ P | Party | |
| 2. Name of Candidate (in this order: First, Middle, Last) | | | | | | include | e post office | box or st | reet, city, | state, zi | p | |
| Anna Mary Prizzia | | | | | code) 2530 NW 11th Ave, Gainesville, FL, 32605 | | | | | | | |
| 4. Telephone | 5. E-mail | address | | | | | | | | | | |
| (910)894-3441 | (910) 894-3441 annaprizzia@gmail.com | | | | | | | | | | | |
| 6. Office sought (include di Alachua County Com | | 7. If a candidate for a <u>nonpartisan</u> office, check if applicable: My intent is to run as a Write-In candidate. | | | | | | | | | | |
| 8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a | | | | | | | | | | | | |
| ☐ Write-In ☐ No Party Affiliation ☑ ☐ Democrat | | | | | | | | Part | у са | ndidate. | | |
| 9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer | | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer Anna Prizzia | | | | | | | | | | | | |
| 11. Mailing Address | | | | | 12. Telephone | | | | | | | |
| 2530 Nw 11th Ave | | | | | (910) 894-3441 | | | | | | 1 | |
| 13. City | 14. Cou | 15. Sta | ate | | | 17. E-mail address | | | | | | |
| Gainesville | | | | | 32605 | | annapriz | zzia@g | mail.co | m | | |
| 18. I have designated the f | ollowing | bank as my | | | rimary Dep | ository | / |] Secor | ndary Dep | ository | | |
| 19. Name of Bank Campus USA | | | | | 20. Address 5115 NW 43rd Ave | | | | | | | |
| 21. City | · · | | | 23. State | | | | | 24. Zip C | ode | | |
| Gainesville | | | | | | FL | | | | 32606 | | |
| UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN 17 ARE TRUE. | | | | | | | | | | | | |
| 25. Date | 26. 9 | Signature | of Cahi | didate | | | | | | | | |
| 10/4/2023 X | | | | | | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | | |
| ı. Anna Prizzia | | | | | | 1 | , do here | by accep | t the appo | ointment | | |
| (Please Print or Type Name) | | | | | | | | | | | | |
| designated above as: Campaign Treasurer. | | | | | | | | | | | | |
| 10/4/20 | \leq | \mathcal{L} | <u></u> | | | <u> </u> | | | | | | |
| Date | | | | Sign | Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | |