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

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

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

RECEIVED

2023 MAY 16 PH 2: 50

SUPERVISOR OF ELECTIONS

officer before opening the campaign account.			OFFICE USE ONLY							
1. CHECK APPROPRIATE BOX(ES):										
Initial Filing of Form	Re-filing to Change:	☐ Trea	surer/D	eputy	Depositor	у 🗌	Office		Party	
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip							
MARK STANOCH			code) 340 165 TH CT NE							
4. Telephone 5. E-mail address			DUAD CHTON EL ZUZIO.							
(941) 840 -2265 NOTE MARK STANOCH . COM										
6. Office sought (include dist	7. If a candidate for a <u>nonpartisan</u> office, check if									
SCHOOL BOARD DISTRICT 1				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 AffiliationParty candidate.										
9. I have appointed the following person to act as my 🔀 Campaign Treasurer 🔲 Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer										
ANNETTE STANOCH										
11. Mailing Address 12. Telephone										
340 165TH CT NE (941)799-1234										
13. City	14. County	15. State								
		FL								
18. I have designated the following bank as my 🔀 Primary Depository 🔲 Secondary Depository										
19. Name of Bank 20. Address										
BANK OF AMERICA 21. City BRADENTON MANATEE				11 200 E STATE ROAD 64 23. State 24. Zip Code						
21. City	22. County						24. Zip C			
BRADENTUR MANATEE			FL			:	34212			
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 IT ARE TRUE.										
25. Date			26. Signature of Candidate							
5/16/23			x Mark Stoinach							
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
I, ANNETTE STANOCH , do hereby accept the appointment										
(Please Print or Type Name)										
designated above as: Campaign Treasurer Deputy Treasurer.										
5/16/2023 X Annette Stanoch										
Date Signature of Campaign Treasurer or Deputy Treasurer										