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 filing officer before

I do not intend to collect or spend any money,

GEORINE.

2021 FEB 23 ATT 10: 36

ALL HAND TOE COUNTY

opening the campaign account.							FFICE USE ONLY	
1. CHECK APPROPRIATE BOX(ES):								
☑ Initial Filing of Form ☐ Re-filing to Change: ☐ Treasur			er/Depu	ty 🗆 Der	ository	☐ Office	□ Party	
2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name)			3. Address (include PO Box or Street, City, State, Zip Code): 4557 Summerlake Circle					
			Parrish FL 34219					
John Zachany Griesi			Parrish L VIII					
Telephone: 5. Candidate's Voter Registrati			tion #: 6. Email Address:					
(908) 930-4744	++ 124102 431 (not required for qualifying purposes			geannegules to hotmail.com				
7. Office Sought (include district	8. If a candidate for a <u>nonpartisan</u> office, check the box							
Fire Commissioner, Parrish Funda 34219 Intend to run as a Write-In Candidate.						ate.		
9. If a candidate for <u>partisan</u> 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:								
11. Name of Treasurer or Deputy Treasurer:			12. Telephone: 13. Email Address:					
Jeanne Marie Gritsi			(908)472-3607 jeannegriesic hotmailicon					
<u> </u>		15, Cit	y:		16. Sta	ite:	17. Zip Code:	
4557 Summerlake Circle Pa		Par	rvish		FL		34219	
18. I have designated the following bank as my (check appropriate box): Primary Depository								
19. Name of Bank: TD Bank			20. Address: 3726 Sun City Center Blvd., Suita 101					
Sun City Center		22. Co			23. State:		24. Zip Code:	
		1+illsborough					33573	
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: 2/23/2024			26. Signature of Candidate:					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
I, Jeanne Marie Griesi (Please Print or Type Name)				_do hereby accept the appointment designated above as:				
☐ Campaign Treasurer. ☐ Deputy Treasurer.								
28. Date: 2/23/2024			29. Signature of Campaign Treasurer or Deputy Treasurer					
			X Jenne Marie Briese					
DS-DE 9 (Rev. 09/23)							le 1S-2.0001, F.A.C.	