

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2019 APR 16 AM 10:32

PALM BEACH COUNTY, FL

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 Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Maria G. Marino

3. Address (include post office box or street, city, state, zip code)

4440 PGA Boulevard, Suite 600
Palm Beach Gardens, Florida 33410

4. Telephone

(561) 906-8222

5. E-mail address

votemariamarino@gmail.com

6. Office sought (include district, circuit, group number)

Palm Beach County Commission, District 1

7. If a candidate for a nonpartisan 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 Republican _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Maria G. Marino

11. Mailing Address

4440 PGA Boulevard, Suite 600

12. Telephone

(561) 906-8222

13. City

Palm Beach Gardens

14. County

Palm Beach

15. State

FL

16. Zip Code

33410

17. E-mail address

votemariamarino@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Wells Fargo

20. Address

4440 PGA Boulevard, Suite 101

21. City

Palm Beach Gardens

22. County

Palm Beach

23. State

Florida

24. Zip Code

33410

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

4/10/19

26. Signature of Candidate

Maria G. Marino

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

I, Maria G. Marino, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/10/19

Maria G. Marino

Date

Signature of Campaign Treasurer or Deputy Treasurer

**APPOINTMENT OF CAMPAIGN TREASURER
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DEPOSITORY FOR CANDIDATES**

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

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Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Maria G. Marino

3. Address (include post office box or street, city, state, zip code)

4440 PGA Boulevard, Suite 600
Palm Beach Gardens, Florida 33410

4. Telephone

(561) 906-8222

5. E-mail address

votemariamarino@gmail.com

6. Office sought (include district, circuit, group number)

Palm Beach County Commission, District 1

7. If a candidate for a nonpartisan 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 Republican _____ Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Noreen A. Fenner

11. Mailing Address

1103 Hays Street

12. Telephone

(850) 212-0226

13. City

Tallahassee

14. County

Leon

15. State

FL

16. Zip Code

32301

17. E-mail address

noreen@pacfm.net

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Wells Fargo

20. Address

4440 PGA Boulevard, Suite 101

21. City

Palm Beach Gardens

22. County

Palm Beach

23. State

Florida

24. Zip Code

33410

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

4/10/19

26. Signature of Candidate

X *Maria G. Marino*

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

I, Noreen A. Fenner, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

Date

4/10/19

X

Signature of Campaign Treasurer or Deputy Treasurer

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

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

(PLEASE PRINT OR TYPE)

SUPERVISOR OF ELECTIONS

2019 APR -2 AM 11:24

PALM BEACH COUNTY, FL.

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 Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

MARIA G. MARINO

3. Address (include post office box or street, city, state, zip code)

4440 PGA BOULEVARD, SUITE 600
PBG FL 33410

4. Telephone

(561) 906-8222

5. E-mail address

vote.mariamarino@gmail.com

6. Office sought (include district, circuit, group number)

PB County Commission, District 1

7. If a candidate for a nonpartisan 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 REPUBLICAN Party candidate.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

MARIA G. MARINO

11. Mailing Address

4440 PGA Boulevard, Suite 600

12. Telephone

(561) 906-8222

13. City

PBG

14. County

PB

15. State

FL

16. Zip Code

33410

17. E-mail address

vote.mariamarino@gmail.com

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

WELLS FARGO

20. Address

4440 PGA Boulevard, Suite 101

21. City

PBG

22. County

PB

23. State

FL

24. Zip Code

33410

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

4/2/2019

26. Signature of Candidate

X *Maria G. Marino*

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

I, MARIA G. MARINO, do hereby accept the appointment

(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/2/2019

Date

X

Maria G. Marino

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY
SUPERVISOR OF ELECTIONS

2019 APR -2 AM 11:24

PALM BEACH COUNTY, FL.

I, Maria G. Marino,

candidate for the office of PB County Commission, Dist 1;

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

X Maria G. Marino

Signature of Candidate

4/2/2019

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).