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 officer before opening the campaign account.

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SUPERVISOR OF ELECTIONS
NEW PORT RICHEY, FLORIDA

officer before opening th		OFFICE USE ONLY								
1. CHECK APPROPRIATE BOX(ES):										
Initial Filing of Form	Re-filing to Change	: Trea	asurer/D	eputy [Depository	O	ffice	☐ Party		
2. Name of Candidate (in this order: First, Middle, Last)			3. Address (include post office box or street, city, state, zip							
Jack Mariano				code) 8116 Greenside Lane						
4. Telephone	5. E-mail address	ail address			Hudson, FL 34667					
	Jackmariano@ao									
Office sought (include district, circuit, group number) Pasco County Commission, District 5			7. If a candidate for a <u>nonpartisan</u> office, check if							
Pasco County Commission, District 3			applicable: My intent is to run as a Write-In candidate.							
Panublian										
Write-In No Party Affiliation XParty candidate.								idate.		
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer										
10. Name of Treasurer or Deputy Treasurer Michael Millner										
11. Mailing Address				12. Telephone						
2055 NW Diamond Creek Way (772) 261-8100							3100			
13. City	14. County	15. State								
		Florida								
18. I have designated the following bank as my Primary Depository Secondary Depository							itory			
DNO D I NIA				20. Address 1021 M.E. Jensen Bench Brun						
21. City			23. State			24	1. Zip Coc	de		
Jensen Beach				Florida			1957			
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.										
				26. Signature of Candidate						
5/08/23				X Jacaston						
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)										
ı, Michael Millner				, do hereby accept the appointment						
(Please Print or Type Name)										
designated above as:	Campaign Tre	asurer.	X	Deputy Tr	easurer.					
5/05/23 X Mall Mills										
Date		Si	Signature of Campaign Treasurer or Deputy Treasurer							