

**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.

RECEIVED

23 SEP 14 PM 3:33

BRIAN E CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA

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)

Gina Finocchiaro

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

10925 Piccadilly Rd  
Port Richey, FL 34668

4. Telephone

(727) 967-7103

5. Candidate's Voter Registration #:

106418111

(Not required for Qualifying Purposes)

(Not required for Qualifying Purposes) - Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form):

G - N a - F I N - o - c a r - r o

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

COUNTY COMMISSIONER DIST 5

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

DENNIS RYDER

11. Telephone

(727) 967-7103

12. Mailing Address

10925 Piccadilly Rd

13. City

PORT RICHEY

14. State

FL

15. Zip Code

34668

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

17. Name of Bank

WELLS FARGO

18. Address

8994 S.R. 52

19. City

HUDSON

20. County

PASCO

21. State

FL

22. Zip Code

34667

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.

23. Date

9-14-23

24. Signature of Candidate

X Gina Finocchiaro

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

I, DENNIS RYDER, do hereby accept the appointment  
(Please Print or Type Name)

designated above as:       Campaign Treasurer.       Deputy Treasurer.

9/14/23

Date

X

[Signature]

Signature of Campaign Treasurer or Deputy Treasurer