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 opening the campaign account.

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2024 J2024 SAIAN 51: MAIL: 00

FILER FOR RECORD, 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): 3. Address (include PO Box or Street, City, State, Zip Code):								
Gregory Wood (Please Print or Type Name) PO Box 1670 Venice, FC 34284								
			Van FC 34284					
4. Telephone:	5. Candidate's Voter Registration #: 6. Email Address:							
(941) 882-0690	(not required for qualif	electgregwood@gmail.com						
7. Office Sought (include district, circuit, group, or seat #):			8. If a candidate for a <u>nonpartisan</u> office, check the box if applicable:					
Sarsaota County School Board District 3			☐ I intend to run as a Write-In Candidate.					
9. If a candidate for partisan 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: Campaign Treasurer Deputy Treasurer								
11. Name of Treasurer or Deputy Treasurer:			12. Telephone:			13. Email Address:		
Gregory Wood			(941)882-0690			electgregwood@gmail.com		
14. Mailing Address:		15. Cit			16. St	ate:	17. Zip Code:	
POBOX 1670		Venice			FL		34284	
18. I have designated the following bank as my (check appropriate box): Primary Depository Secondary Depository								
19. Name of Bank:			20. Address:					
Seacoast Bank 21. City:		735 E Venice A						
Venice		22. County: Sarasota			FL State:		24. Zip Code: 34285	
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.								
26. Signature of Candidate:								
25. Date: (-5-Z4			x Maland					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
I, Gresor Wood do hereby accompany (Please Print or Type Name)					y accept the appointment designated above as:			
Campaign Treasurer.				Deputy Treasurer.				
28. Date: 1-5-24			29. Signature of Campaign Treasurer of Deputy Treasurer					
			X SIMUES					
DS-DE 9 (Eff. 10/23)							Rule 1S-2.001, F.A.C.	