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

RECEIVED

APR 09. 2024

BY: d5

OFFICE USE ONLY opening the campaign account. 1. CHECK APPROPRIATE BOX(ES): Office Party ☐ Treasurer/Deputy ☐ Depository ☑ Initial Filing of Form ☐ Re-filing to Change: 3. Address (include PO Box or Street, City, State, Zip Code): 2. Name of Candidate (in this order: First, Middle, Last): (Please Print or Type Name) 46 JANA Drive PONCE INLET, FLORIDA 32127 Joseph John VillANellA 5. Candidate's Voter Registration #: 6. Email Address: 4. Telephone: JJ VillANE @ YMAIL. COM (386) 788 4617 / OST 36936 (not required for qualifying purposes)

7. Office Sought (include district, circuit, group, or seat #): 8. If a candidate for a nonpartisan office, check the box PONCE INLET COUNCIL SCAT 4 if applicable: ☐ 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 Party candidate. No Party Affiliation Candidate. Write-In Candidate. X Campaign Treasurer Deputy Treasurer 10. I have appointed the following person to act as my: 13. Email Address: 11. Name of Treasurer or Deputy Treasurer: 12. Telephone: 1386,788-4617 JJVILLANE QYMAIL. Com Joseph J VIllANellA 17. Zip Code: 14. Mailing Address: 46 JANA Drive 18. I have designated the following bank as my (check appropriate box):

Primary Depository

Secondary Depository 20. Address: 19. Name of Bank: UIST BANK 3640 So. ATLANTIC AUR Shores Volusin 7Lorids 3 24. Zip Code: 21. City: DAYTONA BEACL Shores 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: Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box) 27. do hereby accept the appointment designated above as: Please Print or Type Name) Deputy Treasurer. Campaign Treasurer. 29. Signature of Campaigr Treasurer of Deputy Treasurer 28. Date: X Rule 1S-2.001, F.A.C. DS-DE 9 (Eff. 10/23)