STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE

(PLEASE TYPE)

OFFICE USE ONLY

JUL15'2414:10

1. Full Name of Committee			Telephone			
SAVE (Save Annual Venio	315-825-8402					
Mailing Address (include city PO Box 74 Venice FL 34284	v, state and zip code)					
Street Address (include city, 233 Sovrano Dr. Venice FL 34285	state and zip code)					
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)						
Name of Affiliated or Connected Organization	Mailing Address	Mailing Address				
None						
3. Area, Scope and Jurisdiction of the Committee Venice City (municipal issue)						
4. Nature of Organization or 0 Education	Organization's Special Interest (e.g., medical, l	egal, educa	ation, etc.)			
5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)						
Full Name	Mailing Address	Committee Title or Position				
	882 Wood Sorrel Ln Venice FL 34293	Treasure	r & Registered Agent			

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	and Position, Other Principal Any (include chairman's name		Officers and	Members of the		
Full Name	Mailing Add	·	Comm	Committee Title or Position		
Jacqueline Mineo	233 Sovrano Dr. Venice FL 34285		Chairman			
Joan M. Roscoe	882 Wood Sorrel Ln Venice FL 34293		Treasurer	Treasurer & Registered Agent		
	Office Sought and Party Affili g (if none, please indicate)	iation Each Candida	ite or Other	Individual that this		
Full Name	Mailing Address	Office	Sought	Party		
N/A				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
8. List Any Issues this Con	nmittee is Supporting:			A SAME		
List Any Issues this Con	nmittee is Opposing: Venice	e City Charter Am	ıendment -	- Nov 5th '24 Ballot		
9. If this Committee is Sup N/A	porting the Entire Ticket of a	Party, Give Name of	f Party	1		
10. In the Event of Dissolut Return to our contributor	tion, What Disposition will be rs	Made of Residual F	unds?			
11. List all Banks, Safety D	Deposit Boxes, or Other Depos	sitories Used for Co	mmittee Fu	nds		
Name of Bank or Depo	ository & Account Number		Mailing Add	dress		
Wells Fargo 3529713962		4205 S. Tamiam Venice, FL 3429				
12. List all Reports Require and Positions of Such	ed to be Filed by this Committ Officials, If Any	tee with Federal Offi	icials and th	ıe Names, Addresses		
Report Title	Dates Required to be Filed	Name & Position of	f Official	Mailing Address		
None						
STATE OF Florida		Saras	ota	COUNTY		
Jacqueline Min	neo	1. /		this Statement of		
Organization is complete, tru	e and correct.					
X Jacquela Signature of Ch	hairman of Political Committee	<u>_</u>	7 15	5 24 Date		

REGISTERED AGENT STATEMENT OF APPOINTMENT

OFFICE USE ONLY

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(Section 106.022, F.S.)				Tours of the state
				JUL15'2414:
Original Appointment Change of Appoin	ntment	·		
Change of Mailing Address Change of Physic	al Address			
Registered Ag	ent and C	Office Information	on	
Name Joan M. Roscoe			Telephone 540-409-7660	
Street Address 882 Wood Sorrel Ln	1			
City Venice	State FL		Zip Code 34293	
Mailing Address PO Box 74				
City Venice	State FL		Zip Code 34284	
I accept this appointment and confirm that I am forth in Section 106.022, F.S. I also understan statement of resignation and filing it with the apple	d that I may	resign this appoir officer.	ligations of the position transfer by executing a	n as set written
Signature of Registered Agent		Date		
Former Registered Agent a	nd Office	Information (fo	r changes only)	
Name			Telephone	
Street Address				
City	State		Zip Code	
Committee or	Organiza	tion Informatio	n	
Name of Committee or Organization SAVE (Save Annual Venice Elections)			
Street Address 233 Sovrano Dr.			Telephone 315-825-8402	
City Venice	State FL		Zip Code 34285	
Signature of Chairperson Jacqueline Mineo			524	
Printed Name of Chairperson		Date	/	

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

POLITICAL COMMITTEES

(Sections 106.011(2) and 106.021(1), F.S.)

DS-DE 6 (Rev. 4/19)

JUL15'2414:10

CHECK APPROPRIATE BOX:					
Initial Filing for: Primary Treasurer Deputy Treasurer					
		,		OFFICE USE ONLY	
Re-filing to Change: Primary Treasurer Deputy Treasurer	Primary/	/Seconda	ry Depository		
1. Committee			2. Telephone		
SAVE (Save Annual Venice Elections)			⁽³¹⁵⁾ 825-8402		
Name of Treasurer or Deputy Treasurer 4. Email (optional)			5. Telephone (optional)		
Joan M. Roscoe jroscoe07@gmail.com			(540) 409-7660		
6. Mailing Address PO Box 74 Venice FL 34284					
7. Street Address 882 Wood Sorrel Ln Venice FL 34293					
8. The following bank has been designated as the Prin	nary Depos	itory	Secondar	ry Depository	
9. Name of Bank	10. Street				
Wells Fargo	Wells Fargo 4205 S. Tamiami Tr.				
11. City		12. Stat	te	13. Zip Code	
Venice		FL		34293	
14. Signature of Chairman (Print or Type)		e)			
Jacqueline Mineo					
Campaign Treasurer's Acceptance of Appointment					
Joan M. Roscoe					
I,, do hereby accept the appointment as (Please Print or Type)					
treasurer or deputy treasurer for SAVE (Save Annual Venice Elections)					
(Committee)					
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.					
7. 15. 24 X	Q	w M	1 hive		
Date	Signature o	f Campa	aign Treasurer or I	Deputy Treasurer	