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.

CITY OF VENICE AUG21'249:35

OFFICE USE ONLY

opening the campaign account. OFFICE USE ONLY							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):					
(Please Print or Type Name)			1132 Bird Bay Way					
JOAN IACONO			Venice Fl. 34285					
4. Telephone:	Telephone: 5. Candidate's Voter Registration #: 6. Email Address:							
(941) 302-7360	129348366 (not required for qualifying purpose			iaconoforvenicecouncil@gmail.com				
7. Office Sought (include district, circuit, group, or seat #):				8. If a candidate for a <u>nonpartisan</u> office, check the box				
City Council Seat #4 if applicable:						date.		
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. Ema			13. Email	Address:	
Joan lacono			(941) 302-7360 iaconoforvenicecouncil@gmail.com					
14. Mailing Address:		15. Cit	•		16. St	ate:	17. Zip Code:	
1132 Bird Bay Way		Venice	ce		FI		34285	
18. I have designated the following bank as my (check appropriate box): I Primary Depository Secondary Depository								
19. Name of Bank:			20. Address: 1306 E. VEnice Ave Fl. 1					
Wells Fargo 21. City: 22. Co								
- 1		Sarasota			FI		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: August 20, 2024			X					
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)								
Joan Iaconodo hereby accept the appointment designated above as: (Please Print or Type Name)								
■ Campaign Treasurer. □ Deputy Treasurer.								
			29. Signature of Campaign Treasurer or Deputy Treasurer					
28. Date: August 20, 202	<u>'</u> 4		. X	A	Ja			
DS-DE 9 (Rev. 09/23) Rule 1S-2.0001, F.A.C.								