

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.					OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES): <input checked="" type="checkbox"/> Initial Filing of Form Re-filing to Change: <input type="checkbox"/> Treasurer/Deputy <input type="checkbox"/> Depository <input type="checkbox"/> Office <input type="checkbox"/> Party					
2. Name of Candidate (in this order: First, Middle, Last) Joshua Daniel Giancarlo			3. Address (include post office box or street, city, state, zip code) 2506 Ambassador Ave Cooper City, FL 33026		
4. Telephone (954) 471-8962		5. E-mail address joshua.giancarlo@gmail.com			
6. Office sought (include district, circuit, group number) Cooper City Commissioner, District 4				7. If a candidate for a <u>nonpartisan</u> office, check if applicable: <input type="checkbox"/> My intent is to run as a Write-In candidate.	
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a <input type="checkbox"/> Write-In <input type="checkbox"/> No Party Affiliation <input type="checkbox"/> _____ Party candidate.					
9. I have appointed the following person to act as my <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer					
10. Name of Treasurer or Deputy Treasurer Joshua Giancarlo					
11. Mailing Address 2506 Ambassador Ave				12. Telephone (954) 471-8962	
13. City Cooper City		14. County Broward	15. State FL	16. Zip Code 33026	17. E-mail address joshua.giancarlo@gmail.com
18. I have designated the following bank as my <input checked="" type="checkbox"/> Primary Depository <input type="checkbox"/> Secondary Depository					
19. Name of Bank Wells Fargo			20. Address 2603 N. Hiatus Rd.		
21. City Cooper City		22. County Broward		23. State FL	24. Zip Code 33026
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.					
25. Date 3/24/2020			26. Signature of Candidate <input checked="" type="checkbox"/>		
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)					
I, <u>Joshua Giancarlo</u> , do hereby accept the appointment (Please Print or Type Name)					
designated above as: <input checked="" type="checkbox"/> Campaign Treasurer <input type="checkbox"/> Deputy Treasurer.					
<u>3/24/2020</u> Date		<input checked="" type="checkbox"/> Signature of Campaign Treasurer or Deputy Treasurer			

Received via email on 4/3/2020



Fri 4/3/2020 5:59 PM

Tina Hudson

FW: Statement of Candidate

Jenna Montoya; Kathryn Sims

From: Joshua Giancarlo <jgiancarlo@giancarlowald.com>

Sent: Friday, April 03, 2020 4:57 PM

To: Kathryn Sims <KSims@coopercityfl.org>; Tina Hudson <TinaH@coopercityfl.org>

Subject: Statement of Candidate

CAUTION: This email originated from outside the City of Cooper City. Do not click links or open attachments unless you recognize the sender and expect the content.

Tina and Kathryn,

Attached are the documents for me to run for the City Commissioner of District 4. Please contact me at 9544718962 if there are any issues.

Regards,
Joshua Giancarlo, Esq.

Sent from my iPhone