CANDIDATE OATH

NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

Check box only if you are seeking to qualify as a write-in candidate: Write-in candidate OFFICE USE ONLY **Candidate Oath** Name to appear on ballot:_ (Name cannot be changed after qualifying.) Check box if two last names without hyphen. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.) Check box if name includes nickname. I swear or affirm that I am a candidate for the nonpartisan office of Comn: 555, bner, Greater Boca Rolen Beach (District (Office)) (District (Circuit #) (Group or Seat #) **County**, Florida I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida. Statement of Outstanding Fines, Fees, or Penalties I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.). NO, I Do Not 1 YES, I Do_____ If you do, you must also specify the amount owed and each entity that levied the same on the reverse side. Signature of Candidate Address of Legal Residence STATE OF FLORIDA COUNTY OF CALM Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: Sworn to (or affirmed) and subscribed before me by means of

physical presence 1

Kanungnit Kitbamrung **Notary Public** State of Florida Comm# HH039241 Expires 9/2/2024

DS-DE 302NP (Eff. 10/2023)

Type of Identification Produced:

Personally Known W OR Produced Identification

online notarization |

this 12 day of _

Rule 1S-2.0001, F.A.C.

Phonetic Spelling of Name				
Phonetic spelling for the audio ballot (wish it to be pronounced on the audio bal	lot as may be used by pers	ons with disabilities (see instructions on page 3 of this form): N - 251-JUT 5:03	
Stateme	ent of Outstanding	Fines, Fees o	r Penalties	
Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.				
Amount		Ent	ity	
	10			
Affidavit of	Nickname (Only requ	ired if using nickr	name for the ballot.)	
My legal name is	E. Ehrnst	I am over th	e age of eighteen (18) and the contents of this	
My nickname is of my legal name. I have not created the a political slogan or otherwise associate	e nickname to mislead vote	rs. My nickname doe	known by this nickname or have used it as part s not imply I am some other person, constitute profane.	
Signature of Candidate: County OF Palm De ach	Fay	Signature of	of Notary Public Stamp Commissioned Name of Notary Public below:	
this 12 day of APril	sical presence	Print, Type, or	Kanungnit Kitbamrung Notary Public State of Florida Comm# HH039241 Expires 9/2/2024	
1760 21 (40)(11)(12)(11) (12)				
DS-DE 302NP (Eff. 10/2023)			Rule 1S-2.0001, F.A.C.	

General Information

Name:

Mr Craig Francis Ehrnst

Address:

1500 PARKSIDE CIR S, BOCA RATON, FL 33486

PID 271015

County:

Palm Beach

AGENCY INFORMATION

Organization

Suborganization

Title

Greater Boca Raton Beach & Park District

Board of Supervisors

CANDIDATE FOR

Position

Agency Name

Position sought or held

Special District

Greater Boca Raton Beach & Parks District

Seat 1

Disclosure Period

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2023 .

Primary Sources of Income

PRIMARY SOURCE OF INCOME (Over \$2,500) (Major sources of income to the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity
NCCI Holdings, Inc 901 Peninsula Corp Cir, Boca Raton, FL		Insurance Services

Secondary Sources of Income

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Real Property

REAL PROPERTY (Land, buildings owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

Location/Description

N/A

Intangible Personal Property

INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over\$10,000) (If you have nothing to report, write "none" or "n/a")

Type of Intangible	Personal owner	
Exxon Mobil stock		
Home Depot stock	Jointly owned with spouse	
US Treasury/Agency bonds	Personal owner	
Campbell Soup stock	Personal owner	
Schwab Money Market Fund	Jointly owned with spouse	

Liabilities

LIABILITIES (Major debts valued over \$10,000): (If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor	Cong Francis Ehmst
Third Federal Savings & Loan	1007 Broadway Ave, Cleveland, Ohio 44105	

Interests in Specified Businesses

INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses) (If you have nothing to report, write "none" or "n/a")

Business Entity #1

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Filer

Craig Francis Ehrnst

Digitally signed: 06/02/2024

Filed with COE: 06/02/2024