

Affidavit of Intent

Santa Rosa County Special District Candidate

State of Florida
County of Santa Rosa

I, JOHN C. SALTER, a candidate for the special district office of:
Print Name

BLACKWATER BOARD OF SUPERVISORS, in the 2022 elections; agree
Name of Office including District, Group or Seat Number

that I will not collect, solicit, or accept any contribution; be it a gift, subscription, conveyance, deposit, loan, payment, or distribution of money or anything of value including contributions in kind having an attributable monetary value in any form, made for the purpose of influencing the results of an election (106.011 (3), Florida Statutes).

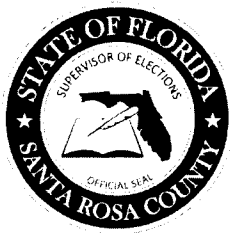
I agree that the only expenditure made on behalf of my candidacy will be the candidate qualifying fee or, in lieu of the qualifying fee, the signature verification fee for candidate petitions.

I further agree that in the event I later decide to collect, solicit, or accept any contribution, as described above, or make a campaign expenditure; be it a purchase, payment, distribution, loan, advance, transfer of funds or gift of money or anything of value made for the purpose of influencing the results of an election (106.011 (4), Florida Statutes), I will be required to file the Appointment of Campaign Treasurer/Designation of Campaign Depository (DS-DE 9) with the Supervisor of Elections office and my campaign will be governed by Chapter 106, Florida Statutes.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AFFIDAVIT AND I AGREE TO ABIDE BY THE LAWS LISTED ABOVE.


Signature of Candidate

5/31/2022
Date



Tappie A. Villane
Santa Rosa County Supervisor of Elections

6495 Caroline Street Ste F
Milton FL 32570-4592
www.VoteSantaRosa.gov

Phone: (850) 983-1900
Fax: (850) 983-1829

2022 Candidate Information Sheet

Name of Candidate

JOHN C. SALTER

Office Seeking

BLACKWATER BOARD OF SUPERVISORS

If Partisan Office list Party Affiliation

Address

3355 GLADEWOOD LN. PACE, FL 32571

E-Mail Address

COTSALINI@AOL.COM

Phone

850.995.8031

DOB or Voter ID.#

02/08/1960

Occupation

FARMER

Campaign Treasurer (Name and Address)

N/A

E-Mail Address

Phone

Deputy Treasurer (Name and Address)

N/A

E-Mail Address

Phone

What would you like the public to know about yourself? (Optional)

What method of Qualifying - Petition or Pay Qualifying Fee?