

CANDIDATE OATH
STATE AND LOCAL PARTISAN OFFICE
WRITE-IN

'26 JUN 12 AM 8:20

OFFICE USE ONLY

Name for voters to write in:

John Williams

☐

Check box if there are two last names without hyphen. (Name cannot be changed after qualifying.)

☐

Check box if name includes nickname. (To use nickname, you must complete the Affidavit of Nickname on page 2 of this form.)

I swear or affirm that I am a candidate for the office of

County Commissioner
(Office)

2
(District #)

(Circuit #)

(Group or Seat #)

I am a qualified elector of

Santa Rosa

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.

I swear or affirm, in addition to being a citizen of the United States, that: (Check applicable box.)

☒

I am not a citizen of another country.

☐

I am a citizen of another country, specifically _____.

Statement of Outstanding Fines, Fees, or Penalties: (Check applicable box. If you do owe more than \$250, you must also specify the amount owed and each entity that levied the same on page 2 of this form.)

I do not

☒

/ I do

☐

owe 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. (s. 99.021(1)(d), F.S.)

Signature of Candidate

Telephone Number

Email Address

Address of Legal Residence

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF

Santa Rosa

Signature of Officer Administering Oath

Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

Sworn to (or affirmed) and subscribed before me by means of

online notarization

☐

OR

physical presence

☒

this 12th day of June, 2026

Type of Identification Produced:

FL DL

DS-DE 301C-E (Eff. 04/2026)

personally known ☐ or produced ID ☒

Emergency Rule 1SER26-2, F.A.C.

Phonetic Spelling of Name
(Not required for qualifying)

Print the name phonetically on the line below as you wish your name to be pronounced on the audio ballot that may be used by persons with disabilities (see attached Guide for Phonetic Spelling).

Detailed Statement of Outstanding Fines, Fees, or Penalties
(Continued)

Amount	Entity

Affidavit of Nickname
(Only required if using nickname for the ballot)

My legal name is _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is _____. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of

online notarization ☐ OR physical presence ☐

this _____ day of _____, 20____

Type of Identification Produced: _____

Signature of Officer Administering Oath

Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

General Information

Name: John Daniel Williams

Organization

Suborganization

Title

N/A

CANDIDATE FOR

Position

Agency Name

Position sought or held

County Commission

Santa Rosa County Commissioner District 2

County Commissioner District 2

Net WorthMy Net Worth as of June 11, 2026 was \$ 80,000.00.**Assets**

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effect is \$ 10,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
N/A	

2025 Form 6 - Full and Public Disclosure of Financial Interests

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2025 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2025 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
M	M	\$ 101,100.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

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

Interests in Specified Businesses

Business Entity # 1

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

John Daniel Williams

Digitally signed: 06/12/2026