



SUPERVISOR
OF ELECTIONS

2020 MAY -5 AM 11:16

ST JOHNS COUNTY
VICKY DATES

Acknowledgement of Candidate's Intention to Qualify

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

(Special Districts, Community Development Districts)

Name: Gina LeBlanc
(Print Name of Candidate)

Office Sought:

☒ Special District: Anastasia Mosquito Control District
(Office and Seat #) Seat 3

☐ Community Development District: _____
(CDD Name and Seat #)

Campaign Account:

☒ **I AM NOT** going to open a campaign account during my candidacy.

I, Gina LeBlanc
(Print Name)

will not be opening a campaign account. However, I understand that, in the event I choose to do so at a later date, I am required to file the requisite forms for this office with the SOE before opening the account. I also understand that a Campaign Treasurer's Report(s) must be filed electronically via the SOE website according to the appropriate reporting schedule.

☐ **I AM** going to open a campaign account during my candidacy.

I, _____
(Print Name)

understand that, before opening a campaign account, I am required to file the requisite forms for this office with the SOE. I also understand that a Campaign Treasurer's Report(s) must be filed electronically via the SOE website according to the appropriate reporting schedule.

Gina LeBlanc
Candidate Signature

5/5/20
Date

P.O. Box 2
Address

Elkton, FL 32033
City / State / Zip

904-692-4424
Phone Number

ginaleblanc492@yahoo.com
E-Mail Address