



# Acknowledgement of Candidate's Intention to Qualify

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

(Special Districts, Community Development Districts)

Name: ROBERT E. OLSON  
(Print Name of Candidate)

Office Sought: ST. AUGUSTINE - ST. JOHNS COUNTY AIRPORT AUTHORITY - GROUP #4

Special District: \_\_\_\_\_  
(Office and Seat #)

Community Development District: \_\_\_\_\_  
(CDD Name and Seat #)

### Campaign Account:

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

I, \_\_\_\_\_  
(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.

Robert E. Olson  
Candidate Signature

05/07/2020  
Date

1801 WINDJAMMER LN.  
Address

ST. AUGUSTINE, FL 32084  
City / State / Zip

303-406-1299  
Phone Number

v.e.olson1@comcast.net  
E-Mail Address

ST. JOHNS COUNTY  
VICKY OAK  
2020 MAY - 7 PM  
SUPERVISOR OF ELECTIONS