

Acknowledgement of Candidate's Intention to Qualify

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

(Special Districts, Community Development Districts)

Name: FRANK W.II. AM L (Print Name of Candidate)	MAR 0 4 2024
(Print Name of Candidate)	ST. JOHNS COUNTY
Office Sought:	,
Special District: District	(Office and Seat #)
(Office and Seat #)	
☐ Community Development District:	(CDD Name and Seat #)
Campaign Account:	
	during my candidacy.
1. FRANK William <	
(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.	
☐ <u>I AM</u> going to open a campaign account durin	· ·
I,(Print Name)	,
(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.	
	3/4/70.
Candidate Signature	Date
Address	City / State / Zip
Phone Number	E-Mail Address
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