



ST. JOHNS COUNTY  
SUPERVISOR OF ELECTIONS

2024 MAY -6 PM 1:06

# Acknowledgement of Candidate's Intention to Qualify

ST. JOHNS COUNTY  
SUPERVISOR OF ELECTIONS

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

(Special Districts, Community Development Districts)

Name: Sarah Gabel Hall  
(Print Name of Candidate)

### Office Sought:

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

Community Development District: Durbin Crossing Board of Supervisors  
(CDD Name and Seat #) Seat 2

### Campaign Account:

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

I, Sarah Hall  
(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.

Sarah Gabel Hall  
Candidate Signature

5/1/2024  
Date

Address

City / State / Zip

Phone Number

Sarhissa007@icloud.com  
E-Mail Address

SUPERVISOR OF ELECTIONS

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MAY - 6 2024  
~~APR - 5 2024~~  
MAY - 6 2024  
ST. JOHNS COUNTY