

Acknowledgement of Candidate's Intention to Qualify

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

SUPERVISOR OF ELECTIONS (Special Districts, Community Development Districts)

11 1 0 - 0 -	TELOTIO
Name: Nata La	MAY 08 2024
(Print Name of Candidate)	
Office Sought:	ST. JOHNS COUNTY
□ Special District:	(Office and Seat #)
	l P d = 1
Community Development District://@	cont Cod seat 5, (CDD Name and Seat #)
	(CDD Name and Seat #)
Campaign Account:	
	nt during my candidacy.
1, Natalia Been (Print Name	marere
(Print Name	e)
will not be opening a campaign account. Ho	owever, I understand that, in the event I choose to do so at a later
	s for this office with the SOE before opening the account. I also eport(s) must be filed electronically via the SOE website according
to the appropriate reporting schedule.	sport(s) must be filed electromically via the SOE website according
☐ I AM going to open a campaign account dur	ring my candidacy
	• •
I,(Print Name	,
understand that, before opening a campaigr	e) n account, I am required to file the requisite forms for this office
with the SOE. I also understand that a Cam	npaign Treasurer's Report(s) must be filed electronically via the
SOE website according to the appropriate re	eporting schedule.
Box-	05-08-2024
Condidate Circuture	
Candidate Signature	Date
885 Winsley Dr.	St. Augustine, Fh 321092
Address	City / State / Zip
	Oity / State / Zip
907-188-9292	bosomazara 1981 Comail con
Dhama Nivershau	

Phone Number

E-Mail Address