



SUPERVISOR
OF ELECTIONS

2024 JUN 13 AM 11:18

Acknowledgement of Candidate's Intention to Qualify

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

(Special Districts, Community Development Districts)

Name: Christopher White
(Print Name of Candidate)

Office Sought:

☐ Special District: _____
(Office and Seat #)

☒ Community Development District: Rivers Edge #1
(CDD Name and Seat #)

Campaign Account:

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

I, Christopher White
(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.

[Signature]
Candidate Signature

6/13/24
Date

203 Rawlings Drive
Address

St. Johns, FL 32259
City / State / Zip

904-699-7288
Phone Number

Cpwhite512@yahoo.com
E-Mail Address