

OF ELECTION

Acknowledgement of Candidate's Intention to Qualify

WITH (OR WITHOUT) OPTION TO OPEN A CAMPAIGN ACCOUNT

ST JOHNS COUNTY (Special Districts, Community Development Districts) YOAKES

Name:	(Print Name of Candidate)		
Office	Sought:		
	Special District:	(Office and Seat #)	
×	Community Development District:	(CDD Name and Seat #)	Sacet-3
Camp	aign 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,		
Candid	SOE website according to the appropriate repo	Date	
145 Addres	5 Riverch. FF Pozeil	Et togestone 7 City / State / Zip	=1 <u>32672</u>
	98-447-3800 Number	dl boykaegua	il.com