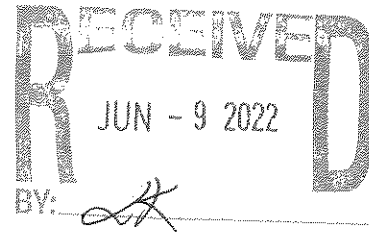


# AFFIDAVIT OF INTENT SPECIAL DISTRICT CANDIDATES



**OFFICE USE ONLY**

**1. CHECK APPROPRIATE BOX(ES):**

Initial Filing of Form     
 Re-filing to Change:     
  Office     
  Party     
  Qualifying Method

2. Name of Candidate (in this order: First, Middle, Last)

*Ronnie Lawson*

3. Address (include post office box or street, city, state, zip code)

*22598 136 st.  
Live Oak, FL 32060*

4. Telephone

*(386) 698-0125*

5. E-mail address

6. Office sought (include district, circuit, group number)

*Soil + Water Conservation District, 4 Group*

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable:      My intent is to run as a

Write-In     
  No Party Affiliation     
  \_\_\_\_\_ Party candidate.

As a candidate for the special district office noted above, to be held in the Primary and/or General Election, as provided by law, I hereby declare that it is my intent that *my only campaign expense* will be from personal funds and shall be for qualifying by:

1. Payment of the signature verification fee for the petition qualifying process requiring 25 valid petitions.

**OR**

2. Payment of the \$25 qualifying fee required for Special District Candidates.

I will not be required to appoint a campaign treasurer, designate a campaign depository or file periodic campaign treasurer's reports as required by Florida Statutes 99.061 and 106.07. Therefore, I am prohibited from collecting, soliciting, accepting any money or in-kind contribution(s), in connection with my campaign. I am also prohibited from making any expenditure(s) on behalf of my candidacy.

In the event I later decide to collect, solicit, or accept any money or in-kind contribution(s) or make any expenditure(s) on behalf of my candidacy, I understand that I will be required to complete and file a DS-DE 9 Appointment of Campaign Treasurer and Designation of Campaign Depository for Candidates form with the Nassau County Supervisor of Elections prior to any such action.

Upon filing a completed DS-DE 9 form, my campaign will then be subject to all provisions of Chapter 106, Florida Statutes, including the requirement to file periodic campaign treasurer's reports.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS STATED IN IT ARE TRUE.**

9. Date

*6-9-22*

10. Signature of Candidate

**X** *Ronnie Lawson*