

CANDIDATE OATH**NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)
Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

VOL SUP OF ELECTIONS
JUN 14 '24 AM 10:46

OFFICE USE ONLY

Candidate Oath

Name to appear on ballot:

Steve Miller

Check box if two last names without hyphen. ☐ (Name cannot be changed after qualifying.)

Check box if name includes nickname. ☐ (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the nonpartisan office of

COUNTY COUNCIL
(Office)

2
(District #)

_____; I am a qualified elector of Volusia County, Florida.
(Circuit #) (Group or Seat #)

I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Statement of Outstanding Fines, Fees, or Penalties

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).

YES, I Do _____ NO, I Do Not ☒

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X Steve Miller (386) 547-0990 stevemiller06@gmail.com
Signature of Candidate Telephone Number Email Address
383 Walnut St Daytona Beach FL 32114
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF

Volusia

Elizabeth L. Lewis
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of
online notarization ☐ OR physical presence ☒

this 14 day of June, 2024.

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____



**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

VOL SUP OF ELECTIONS
JUN 14 '24 AM 10:46

NOTE: This form must be on file with the filing officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

☐ Initial Filing of Form ☒ Re-filing to Change: ☒ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

2. Name of Candidate (in this order: First, Middle, Last):
(Please Print or Type Name)

Steven W. Miller

3. Address (include PO Box or Street, City, State, Zip Code):

383 WALNUT ST.
Daytona Beach, FL 32114

4. Telephone:

(386) 547-0990

5. Candidate's Voter Registration #:

(not required for qualifying purposes)

6. Email Address:

stevemiller06@gmail.com

7. Office Sought (include district, circuit, group, or seat #):

COUNTY COUNCIL DISTRICT 2

8. If a candidate for a nonpartisan office, check the box if applicable:

☐ I intend to run as a Write-In Candidate.

9. If a candidate for partisan office, check the box and fill in the name of the party as applicable: I intend to run as a

☐ Write-In Candidate. ☐ No Party Affiliation Candidate. ☐ _____ Party candidate.

10. I have appointed the following person to act as my:

☒ Campaign Treasurer

☒ Deputy Treasurer

11. Name of Treasurer or Deputy Treasurer:

Steven W. Miller

12. Telephone:

(386) 547-0990

13. Email Address:

stevemiller06@gmail.com

14. Mailing Address:

383 WALNUT ST.

15. City:

Daytona Beach

16. State:

FL

17. Zip Code:

32114

18. I have designated the following bank as my (check appropriate box): ☒ Primary Depository ☐ Secondary Depository

19. Name of Bank:

SOUTH STATE BANK

20. Address:

1950 W. International Speedway Blvd

21. City:

Daytona Beach

22. County:

Volusia

23. State:

FL

24. Zip Code:

32114

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR THE APPOINTMENT OF THE CAMPAIGN TREASURER AND DESIGNATION OF THE CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date:

6/13/24

26. Signature of Candidate:

X 

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate box)

I, Steven W. Miller

(Please Print or Type Name)

do hereby accept the appointment designated above as:

☒ Campaign Treasurer.

☐ Deputy Treasurer.

28. Date:

6/13/24

29. Signature of Campaign Treasurer or Deputy Treasurer

X 