



# Wesley Wilcox

Supervisor of Elections, Marion County, FL

**Election Center**

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W [www.VoteMarion.Gov](http://www.VoteMarion.Gov)

## Affidavit of Intent Committeemen and Committeewomen

STATE OF FLORIDA

Date \_\_\_\_\_

COUNTY OF MARION

Voter ID \_\_\_\_\_

I \_\_\_\_\_, a candidate for the office of

*Printed Name of Candidate*

Precinct

Committeeman

State

Committeewoman

\_\_\_\_\_ in the 2020 elections,

*Mark one box*

*Mark one box*

*Precinct Number*

AGREE that in the event I decide to accept "contributions" (F.S. 106.011), and/or make "expenditures" (F.S. 106.011), for the purpose of influencing the results of an election, I will comply with the requirements of F.S. 106.0702 and file a single report of all contributions and expenditures. The report shall be filed on the 4<sup>th</sup> day preceding the Primary Election with the Marion County Supervisor of Elections.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AFFIDAVIT, AND AGREE TO ABIDE BY THE LAWS LISTED ABOVE.

\_\_\_\_\_  
*Email*

\_\_\_\_\_  
*Signature and Date*

\_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City, State, Zip*