

CANDIDATE OATH –  
NONPARTISAN OFFICE

(Not for use by Judicial or  
School Board Candidates)

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CITY OF OCALA, FLORIDA  
CITY CLERK

OFFICE USE ONLY

OATH OF CANDIDATE  
(Section 99.021, Florida Statutes)

I, MARY S. RICH  
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT \* – NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of CITY COUNCIL, 2,  
(office) (district #)

\_\_\_\_\_ ; I am a qualified elector of MARION County, Florida;  
(circuit #) (group or seat #)

I am qualified 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.

X Mary S. Rich (352) 629-1571 \_\_\_\_\_  
Signature of Candidate Telephone Number Email Address

1802 NW 24th St Ocala \_\_\_\_\_ FL \_\_\_\_\_ 34475  
Address City State ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 105737610

\* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

MARY S. RICH

STATE OF FLORIDA  
COUNTY OF Marion

Sworn to (or affirmed) and subscribed before me this 9 day of July, 2015.

Personally Known:  or

Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_

Angel B. Jacobs  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public  
**ANGEL B. JACOBS**  
MY COMMISSION # FF 131367  
EXPIRES: October 10, 2018  
Bonded Thru Budget Notary Services