

**CANDIDATE OATH –  
NONPARTISAN OFFICE**

(Not for use by Judicial or  
School Board Candidates)

RECEIVED

2015 JUL -9 A 10:55  
CITY OF OCALA, FLORIDA  
CITY CLERK

OFFICE USE ONLY

**OATH OF CANDIDATE**  
(Section 99.021, Florida Statutes)

I, William "Billy" Gilchrist  
(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 Mayor (office) (district #)

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

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 William R. [Signature]  
Signature of Candidate

(352) 427-5620  
Telephone Number

bgilchrist@firstavebank.com  
Email Address

3635 SE 11th Place  
Address

Ocala  
City

Florida  
State

34471  
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 105740503

\* 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):

WILLIAM "BILLY" GILCHRIST

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: FL DL

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