CANDIDATE OATH PRECINCT COMMITTEEMEN AND COMMITTEEWOMEN

RECEIVED

2016 JUN 23 AM 9: 00

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)
I, Anne E. Heming way Fever (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 office of Precinct \square Committeeman \square Committeewoman Precinct Number 25 ,
I am a qualified elector of
Candidate's Florida Voter Registration Number (located on your voter information card):
* 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):
STATEMENT OF PARTY (Section 99.021, Florida Statutes)
I am a member of the DeMoCratic Party; I have not been a registered member of any other political party for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member. Nemingle Party; I have not been a registered member of any other political party in the paid that the paid the paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member. Nemingle Party; I have not been a registered member of any other political party and I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member. Nemingle Party; I have not been a registered member of any other political party and I have paid the assessment levied against me, if any as a candidate for said office by the executive committee of the political party, of which I am a member. Nemingle Party; I have not been a registered member of any other paid the party and party
STATE OF FLORIDA COUNTY OF MIAMINACOL
Sworn to (or affirmed) and subscribed before me this 14th day of June, 2016.
Personally Known: or
Produced Identification: Print, Type, or Stamp Commissioned Name of Notary Public
Type of Identification Produced:
Orivers Crumse ZENIA M PEREZ Commission # FF 942130 My Commission Expires December 08, 2019