NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate)	
Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	4
☐ Write-in candidate	RECEIVED
	JUN 1 8 2018
	ate Oath (a), Florida Statutes)
(Print name above as you wish it to appear on the ballot.	If your last name consists of two or more names but has no Names). No change can be made after the end of qualifying. ballot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office ofPort	Orange City Council, 2
	(Office) (District #)
	VOIUSIA 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.	
Candidate's Florida Voter Registration Number (located on yo	ur voter information card): 108760086
Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.] SARAH JONES	
X S 1 386 290-2653 sarahjanejones@mac.com Signature of Candidate Telephone Number Email Address	
44 Woodfield Dr, Port Orange,	FL. 32129
Address City	State / / ZIP Code
STATE OF FLORIDA	SHAWALLEW
COUNTY OF VOLUSIA	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me this 15 day of, 20 Personally Known: or Produced Identification:	ROBIN L. FENWICK MY COMMISSION & FF 897018 EXPIRES: August 26, 2019 Bonded Thru Budget Notary Services
Type of Identification Produced:	
DO DE AMAIN (David 44/44)	

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