CANDIDATE OATH –
SCHOOL BOARD
NONPARTISAN OFFICE

Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

2018 JUN 19 PM 02:28

OFFICE USE ONLY

Candidate Oath
(Sections 99.021(1)(a) and 105.031, Florida Statutes)

I, _GUNNAR PAULSON_

(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 hyphen, check box ☐. (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of _School Board Alachua County_, _3_,
(Office) (District #)

_____, _____ ; I am a qualified elector of _ALACHUA COUNTY_ 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.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the school board and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Candidate's Florida Voter Registration Number (located on your voter information card): _100 409 784_

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.]*

(GUN) (ER) (PAUL~~ ~~ GUNNER · PAUL – SON

X _Gunnar J. Paulson_   (352) 214-2308   GUNNARFPAULSON@YAHOO.COM

Signature of Candidate | Telephone Number | Email Address

8617 NW 35th RD, GAINESVILLE   _FLORIDA_   _32606_
Address | City | State | ZIP Code

STATE OF FLORIDA

COUNTY OF _Alachua_

Sworn to (or affirmed) and subscribed before me this _19_ day of _June_, 20_18_.

Personally Known: _____ or Produced Identification: _____

Type of Identification Produced: _FL DL_

_____
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

DS-DE 304SB (Rev. 11/17)   Rule 1S-2.0001, F.A.C.