

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

CITY OF GAINESVILLE
CITY COMMISSION

2019 FEB -1

AM 8:58

OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, Robert Mounts
(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 Commissioner District 4
(office) (district #)

(circuit #) (group or seat #); I am a qualified elector of Alachua 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 Robert D. Mounts

Signature of Candidate

(352) 665-9296 robert.t.mounts@gmail.com

Telephone Number

Email Address

1639 NW 11th Road, Gainesville
Address City

FL
State

32605-5319
ZIP Code

Candidate's Florida Voter Registration Number (located on your voter information card): 100538302

* 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):

RAH BERT MOUNTS

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 1st day of February, 2019.

Personally Known: _____ or

Produced Identification: ✓

Type of Identification Produced: FLDL



Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public