## **CANDIDATE OATH – SCHOOL BOARD** NONPARTISAN OFFICE

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

2020 JUN 11 PMO4:18

wiile-	-in candidate.	
	Write-in candidate	

Write-in candidate							
			· · · · · · · · · · · · · · · · · · ·	OFFICE USE ONLY			
		ate Oath					
(Sections 99.021(1)(a) and 105.031, Florida Statutes)							
া, Diyonne L. McGraw	<i>l</i>						
hyphen, check box 🔲 . (See pa	ge 2 - Compound Last I	If your last name consists of two Names). No change can be made ballot, the name must be printed a	after the e	nd of qualifying.			
am a candidate for the nonpartisan of	County School Boa	rd	, <u>2                                    </u>				
		(Office)		(District #)			
NA , NA ; i	am a qualified elector of	Alachua	Ţ	County, Florida;			
(Circuit #) (Group or Seat #)		<u> </u>		·			
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 Ar funds as such employee or officer, do and of the State of Florida.	nerica, and being employ	ed by or an officer of the school b	oard and a r	recipient of public			
Candidate's Florida Voter Registration Number (located on your voter information card): 100434689							
Phonetic spelling for audio ballot: F ballot as may be used by persons with o die-yawn ma-graw							
X Sigure W. II	(352) 246-80	71 mcgrawforsti	udents@	gmail.com			
Signature of Candidate	Telephone Number		Email Address				
4331 NW 21st Terrace	GNV	<u> </u>		2605			
Address	City	State	. ZI	IP Code			
STATE OF FLORIDA		Stephanie Deawhe	eght				
COUNTY OF A CHUA  Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below							
Sworn to (or affirmed) and subscribed befor		STEPHANIE SEAWRIGH	<b>ЦТ</b>				
online presence this // day of \( \sum \) day of \( \sum \) day of \( \sum \) (Commission # GG 046066							
Personally Known: or Produced Identification: Bonded Thru Troy Fain Insurance 800-385-7019							
Type of Identification Produced:							