CANDIDATE CATU	
CANDIDATE OATH -	
STATE AND LOCAL PARTISAN OFFICE	
Check applicable one:	
✓ Candidate with party affiliation	
Candidate with no party affiliation	2020 JUN 03 PM01:58
☐ Write-in candidate	01,
Candi	date Oath
(Section 99.021(1	uate Oatn 1)(a), Florida Statutes)
I, Jason Stanford	
Although a write-in candidate's name is not printed on the	t. If your last name consists of two or more names but has no Names). No change can be made after the end of qualifying. be ballot, the name must be printed above for oath purposes.)
am a candidate for the office of County Commissio	oner 3
(Office)	(District #) (Circuit #)
; my legal residence is Alachua	County, Florida; I am a qualified elector
(Group or Seat #)	
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.	
Statemen	nt of Party
(Section 99.021(1)(b), Florida Statutes) (Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)	
Lam - manutan tu	
party for 365 days before the beginning of qualifying preceding	Party; I have not been a registered member of any other political g the general election for which I seek to qualify; and I have paid id office by the executive committee of the political party, of which
Candidate's Florida Voter Registration Number (located on yo	our voter information card): 116892046
Phonetic spelling for audio ballot: Print name phonetically c	on the line below as you wish it to be pronounced on the audio
pallot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]  JASON STANFORD	
X (404) 545-907	jasoriioralaciiua@giiiaii.com
Signature of Candidate Telephone Number PO Box 6175 Gainesville	Email Address
Address City	FL 32627 State ZIP Code
STATE OF FLORIDA	State Court
county of <u>Clachua</u>	Signature of Notary Public
Sworn to (or affirmed) and subscribed before me by physical or	Print, Type or Stamp Commissioned Name of Notary Public below:
online presence this 2 day of 5 one 20 20	YVETTE CARRERAS Notary Public-State of Florida *E Commission # GG 953846
Personally Known: or Produced Identification:	My Commission # GG 953846  My Commission Expires
Type of Identification Produced: TI Drivers Lic.	February 02, 2024