City of Lynn Haven

Affidavit of Residency

STATE OF FLORIDA COUNTY OF BAY





I, Robert I. Schultz (Print Name)	_, being duly sworn, depose
and say that I hereby declare and assert my candidacy for the office of	
City Commissioner, Seat 1 (Print Office Sought and Seat Number)	_for the City of Lynn Haven, Florida.
I further depose and say that I am legally qualified to be a candidate for election to the Office	
of City Commissioner, Seat 1 (Print Office Sought and Seat Number)	_and that I am a registered voter, who
is legally eligible to vote in City Elections. I also depose and say that I currently reside	
in the City of Lynn Haven at:509 Pennsylvania Ave	
(Print Street Address)	
R J Signature of Candidate	