CANDIDATE OATH -			
STATE AND LOCAL PARTISAN OFFICE			
Check applicable one:	₹ 23×	\$30₹	
Candidate with party affiliation	\$0 30°	0 30	
Candidate with no party affiliation			
☐ Write-in candidate			OFFICE USE ONLY
Candio	date Oath		OFFICE USE UNLT
(Section 99.021(1)(a), Florida Statutes)			
(Print name above as you wish it to appear on the ballot.	If your last name consists	s of two or more	names but has no
hyphen, check box			
am a candidate for the office of Superintenden	of Schools,	(District #)	(Circuit #)
; I am a qualified elector of	O(1	County, Florida; I	,
(Group or Seat #)	9	•	
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.			
Statement 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.) I am a member of the			
Candidate's Florida Voter Registration Number (located on your voter information card): 100616935			
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.]			
Signature of Candidate 34/6 Country Cub L Lynn Have Address STATE OF FLORIDA COUNTY OF Say Sworn to (or affirmed) and subscribed before me by physical for online _ presence this	Signature of Notary Print Type of Stamp (Y)(2)	govisska 886 fuel no o Nublic - State of Florida nission # GG 337043 n. Expires May 21, 2023 n. Expires May 21, 2023 ligh National Notary Assn.	ZIP Code lotary Public below:
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