CANDIDATE OATH – NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

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

☐ Write-in candidate

BAY COUNTY 23 BAY COUNTY 32

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Thomas Balduf

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box ☐. (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of Lake Powell CDD (*Office*), _____ (*District #*),

_____ (*Circuit #*), 3 (*Group or Seat #*); I am a qualified elector of Bay 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 122172450

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.]*

Ten-Found-Mat Bed-kat-laim-debt-uh-fed

X _____ **Signature of Candidate**

(615)869-9011 Telephone Number

tgb1989htb@gmail.com Email Address

1723 Lost Cove Lane Address | Panama City Beach City | FL State | 32413 ZIP Code

STATE OF FLORIDA

COUNTY OF Bay

Sworn to (or affirmed) and subscribed before me by physical ✓ or online ___ presence this 9th day of June, 2020.

Personally Known: _____ or Produced Identification: ✓

Type of Identification Produced: FL DL

_____ **Signature of Notary Public**

Print, Type, or Stamp Commissioned Name of Notary Public below:

NOTARY PUBLIC STATE OF FLORIDA
CHELSEA R. HITT
MY COMMISSION # GG226802
EXPIRES: June 10, 2022

DS-DE 302NP (Rev. 04/20)

Rule 1S-2.0001, F.A.C.

BAYSIDE 02/06/2020 14:15