## **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	OFFICE USE ONLY
Candidate Oath (Section 99.021(1)(a), Florida Statutes)	
(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	City Council member,, (District #)
(Circuit #), ## ; 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): 100 4 7 4 5 4 9	
<b>Phonetic spelling for audio ballot</b> : 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.]	
X Drugo Barrow (850) 890. Signature of Candidate Telephone Number  1103 Moss Street Parker  Address City	-8396 barrow@comcast.net  Email Address  TL 32404  State ZIP Code
STATE OF FLORIDA  COUNTY OF BOW	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means of online notarization \( \begin{array}{c} OR \\ \text{physical presence} \end{array} \)  this \( \begin{array}{c} \begin{array}{c} \text{Months of the physical presence} \end{array} \)  Personally Known \( \begin{array}{c} OR \\ \text{Produced Identification} \end{array} \)  Type of Identification Produced: \( \frac{\f	JAVINA WARD  Notary Public - State of Florida  Commission = GG 320058  My Comm. Expires Jul 31, 2023  Bonded through National Notary Assr.