CANDIDATE OATH JUDICIAL OFFICE

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

DS-DE 303JU (Eff. 10/2023)





☐ Write-in candidate	OFFICE USE ONLY
Candidate Oath	
Name to appear on ballot: Shane Royal Vann	
Check box if two last names without hyphen. (Name cannot be changed after qualifying.)	
Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)	
I swear or affirm that I am a candidate for the judicial office of	
1 swear or amirm that I am a candidate for the judicial office of	(Office) (District #)
Group 2 ; my legal residence (Group or Seat #)	is Bay County, Florida;
I am a qualified elector of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the constitution and laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent to the office I seek; I have resigned from any office which I am required to resign pursuant to s. 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida. Section 876.05, Florida Statutes (only applicable if elected and when term of office begins): I am a citizen of the State of	
Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.	
Statement of Outstanding Fines, Fees, or Penalties	
I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 105.031(4) F.S.).	
YES, I Do NO, I Do Not X	
If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.	
X (850) 74 Signature of Candidate Telephone Numb	7-5205 Vanns@jud14.flcowts.org
609 Sommer Cir. Vanuma	City 7-C 52405
Address of Legal Residence City	State ZIP Code
STATE OF FLORIDA	
COUNTY OF	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 OR physical presence	STEPHANIE R. WOODS
this day of	Commission # HH 054263 Expires November 11, 2024 Bonded Thru Troy Fein Insurance 800-385-7019
Type of Identification Produced:	

TROUBLE HOUSE