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

Candidate Oath

Name to appear on ballot: **Tom Balduf**

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 nonpartisan office of **lake Powell CDD** _____, _____,
(Office) (District #)

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

I am a qualified elector 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 Outstanding Fines, Fees, or Penalties

I owe outstanding fines, fees, or penalties, that cumulatively exceed $250, for ethics or campaign finance violations (*s. 99.021(1)(d), 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 _[signature]_ (615)8699011 tgb1989htb@gmail.com
Signature of Candidate | Telephone Number | Email Address

1723 Lost Cove lane | PCB | FL | 32413
Address of Legal Residence | City | State | ZIP Code

STATE OF FLORIDA

COUNTY OF ___Bay___

Sworn to (or affirmed) and subscribed before me by means of

online notarization [ ] OR physical presence [✓]

this _12th_ day of _June_, 20_24_

Personally Known [ ] OR Produced Identification [✓]

Type of Identification Produced: __FL DL__

[signature] Clube R Hitt
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

CHELSEA HITT
Notary Public - State of Florida
Commission # HH 273143
My Comm. Expires Jun 10, 2026
Bonded through National Notary Assn.

DS-DE 302NP (Eff. 10/2023) | Rule 1S-2.0001, F.A.C.

Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):

_____

Statement of Outstanding Fines, Fees or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed $250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity

Affidavit of Nickname (Only required if using nickname for the ballot.)

My legal name is Thomas Balduf _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is Tom Balduf _____. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

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 ☑

this 12ᵗʰ day of June , 20 24 .

Personally Known ☐   OR   Produced Identification ☑

Type of Identification Produced: FL DL _____

CHELSEA HITT
Notary Public · State of Florida
Commission # HH 273143
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