CANDIDATE OATH -JUDICIAL OFFICE

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

Write-in candidate

2018 APR 30 PM 2: 0

DOOWARD COUNTY

		SUPERVI	SOR OF ELECTIONS	OFFICE USE ONLY
Candidate Oath				
(Section 105.031, Florida Statutes)				
I, OLGA LEVINE				
(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 \square . (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 judicial office of	County Court Judge		,,	
		(Office)	(District #)	(Circuit #)
5 ; my legal residence is	BROW	ARD	County, Florida; I am	a qualified elector
(Group #)				
of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the 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 with the office I seek; and I have resigned from any office 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. Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, 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.				
Candidate's Florida Voter Registration Number (located on your voter information card): 101313898				
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.] OLGA LEVINE				
X alon Louise	954 ⁾ 522-2526	Olga-L	Olga-Levine@hotmail.com	
Signature of Candidate	elephone Number		Email Address	
888 South Andrews Ave., #203	Ft. Lauderdale	FI.	3:	3316
Address	City	State	THINING SARCE	P Code
STATE OF FLORIDA COUNTY OF COUNTY		400	Rubling, 203/2007	Public below:
Sworn to (or affirmed) and subscribed before me this day of Personally Known: or Produced Identification:		* Balling	#GG 086846 #GG 086846 #GG 086846 #GD onded through the state of the	
Type of Identification Produced:				

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