JUDICIAL OFFICE

JUDICIAL OFFICE Check box only if you are seeking to qualify as a write-in candidate: 2018 MAY -3 AM 11: 37 Write-in candidate BROWARD COUNTY SUPERVISOR OF ELECTIONS OFFICE USE ONLY **Candidate Oath** (Section 105.031, Florida Statutes) Michael John Heise (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 judicial office of County Court Judge, Group 10 (Office) (District #) ; my legal residence is 1500 S.E. 15th St. Apt 216, Fort Lauderdale, Fl. 33316 County, Florida; I am a qualified elector 10 (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): 10152 68 46 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.] (₉₅₄)₂₉₅₋₇₁₆₈ electheise@gmail.com Signature of Candidate Telephone Number **Email Address** 1500 S.E. 15th ST. Apt 216 Fort Lauderdale FI 33316 Address City State ZIP Code STATE OF FLORIDA Signature of Notary Public COUNTY OF Broward Print, Type, or Stamp Commissioned Name of Notary Public below: Sworn to (or affirmed) and subscribed before me this 2nd DANIELLE N. FORD day of <u>May</u>, 20<u>18</u>. Commission # GG 044281 Expires November 2, 2020 Personally Known: _____ or Produced Identification: Bonded Thru Troy Fain Insurance 800-385-7019

Type of Identification Produced:

DANIGLLE N. FORD

Commission # GG 04 158 : Fig. Expires November 2, 2021 Sease That Tay Each arene 606 343 2013