

**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

2018 JUN 18 PM 1:33

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

OFFICE USE ONLY

**Candidate Oath**

(Section 99.021(1)(a), Florida Statutes)

I, Alissa Schafer

(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.)

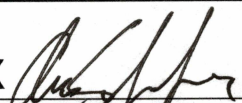
am a candidate for the nonpartisan office of Broward County Soil & Water Conservation District, \_\_\_\_\_  
(Office) (District #)

\_\_\_\_\_, 4 ; I am a qualified elector of Broward County, Florida;  
(Circuit #) (Group or Seat #)

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): 122457874

**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.]  
uh-liss-uh sh-ai-fer

**X**   
Signature of Candidate

( 954 ) 734-3773  
Telephone Number

alissajeanschafer@gmail.com  
Email Address

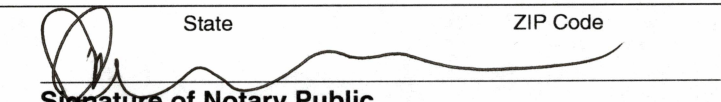
2310 SW 84th Way  
Address

Miramar  
City

FL  
State

33025  
ZIP Code

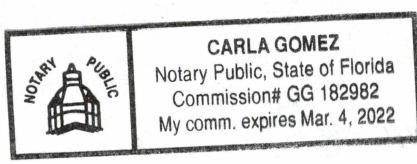
**STATE OF FLORIDA**  
**COUNTY OF Broward**

  
**Signature of Notary Public**  
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this 14th  
day of June, 2018.

Personally Known: \_\_\_\_\_ or Produced Identification: X

Type of Identification Produced: FLD



2018 JUN 15 PM 3:53

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS