

**CANDIDATE OATH  
STATE AND LOCAL PARTISAN OFFICE  
WITHOUT PARTY AFFILIATION**



OFFICE USE ONLY

**Candidate Oath**

Name to appear on ballot: Paul M Grogan

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 office of County Commissioner, 5  
(Office) (District #)  
; I am a qualified elector of Citrus 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 No Party Affiliation**

I am registered without any party affiliation and have not been a registered member of any political party for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify.

**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 ☒

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X Paul M Grogan ( ) 352- 212- 8844 PaulMGrogan@gmail.com  
Signature of Candidate Telephone Number Email Address  
510 Turner Camp Rd Inverness Florida 34450  
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF Citrus

Sworn to (or affirmed) and subscribed before me by means of  
online notarization ☒ OR physical presence ☐  
this 11 day of June, 20 24.

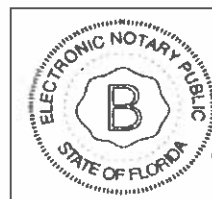
Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: Florida Driver License

Kaitlin S. Redding  
Signature of Notary Public

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

Notarized online using audio-video communication



Kaitlin Redding  
Electronic Notary Public  
State of Florida  
Commission #: HH483459  
Commission Expires: 03/10/2026