CANDIDATE OATH

NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

Record 2024JUN11am08:01

Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	
Write-in candidate	OFFICE USE ONLY
	OFFICE USE ONLT
Candidate Oath	
1 - m	
Name to appear on ballot: VOS & M. Lopez	
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 Arm Strong CDD (District #)
6	(Office) (District #)
(Circuit #) (Group or Seat #); I am a qualified elect	or of <u>Clay</u> County, Florida;
(Group or Geat #)	
Lam 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 resigned	gn pursuant to Section 99.012, Florida Statutes; and I will support the
	of Florida
Constitution of the United States and the Constitution of the State	of Florida.
Constitution of the United States and the Constitution of the State	oi Fiorida.
	ing Fines, Fees, or Penalties
Statement of Outstand	
Statement of Outstand I owe outstanding fines, fees, or penalties, that cumulatively exce	ing Fines, Fees, or Penalties ed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).
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