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:

DS-DE 302NP (Eff. 10/2023)

Record 2024JUN11AH10:03

Rule 1S-2.0001, F.A.C.

Write-in candidate	OFFICE USE ONLY
Candidate Oath	
Name to appear on ballot: Schum Reyler 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.)	
	of <u>CDD RIP GF (WOW)</u> TRIVES ** (Office) (District #) or of <u>CMY</u> County, Florida
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 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.	
Signature-of Candidate Telephone Numb H341 Garan Rivera Address of Legal Residence City STATE OF FLORIDA COUNTY OF CLAY Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence this or physical presence this or physical presence or	State ZIP Code Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: HENRI BERBERI Notary Public - State of Florida Commission # HH 384836 My Comm. Expires Apr 10, 2027