CANDIDATE OATH

NONPARTISAN OFFICE

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

Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	Record 2024JUN10PM12:07
Write-in candidate	OFFICE USE ONLY
Candidate Oath	
Name to appear on ballot: ROBERT KEEFE	
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 WILFORD PROSERVE CDD, (District #) (Office) (Circuit #) (Group or Seat #) 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 Number Address of Legal Residence City	17680 ROBERT. KEEFE WMAC. COM
STATE OF FLORIDA COUNTY OF	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: KAYLA S. O'NEAL MY COMMISSION # HH375271 EXPIRES: April 16, 2027

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

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