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 Record 2024JUN10PH12:14 candidate: Write-in candidate OFFICE USE ONLY **Candidate Oath** Name to appear on ballot: WESLEY (WEST TAY (Name cannot be changed after qualifying.) Check box if name includes nickname. U (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 <u>Soil そんれで</u>に (Office) ; I am a qualified elector of <u>CLAV</u> County, Florida (Circuit #) 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.). NO, I Do Not YES, I Do If you do, you must also specify the amount owed and each entity that levied the same on the reverse side. Redacted Telephone Number Email Address Redacted Address of Legal Residence ZIP Cdde City State STATE OF FLORIDA **COUNTY OF** Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: Sworn to (or affirmed) and subscribed before me by means of physical presence online notarization OR THE PART OF THE PA this 29 day of .2024 MY COMMISSION # HH375267 Personally Known OR Produced Identification EXPIRES: June 27, 2027

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

Type of Identification Produced:

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