CANDIDATE OATH

NONPARTISAN OFFICE

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

Rectid 2024 TUNA Cound: 24

Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	Kecno SOSdODMTObwod+Sd
Write-in candidate	OFFICE USE ONLY
Cond	idata Oath
Candidate Oath	
Name to appear on ballot: G. GLENN W	ARREN
Check box if two last names without hy	phen. (Name cannot be changed after qualifying.)
Check box if name includes nickname. (For use of a nickname)	ckname, you must complete the Nickname Affidavit on reverse side.)
I swear or affirm that I am a candidate for the nonpartisan office	SUPERVISOR SYCOD
Ц	(Office) (District #)
(Circuit #) (Group or Seat #)	of SUPERVISOR , SVCDD, (Office) (District #)
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
	nich 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 resi Constitution of the United States and the Constitution of the State	gn pursuant to Section 99.012, Florida Statutes; and I will support the
Constitution of the Office States and the Constitution of the State	or Florida.
Statement of Outstand	ing Fines, Fees, or Penalties
	- ' '
I owe outstanding fines, fees, or penalties, that cumulatively exce	ed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).
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