

**CANDIDATE OATH
STATE COMMITTEEMEN AND
COMMITTEEWOMEN**

RECEIVED

JUN 13 2024

DUVAL COUNTY ELEC.
By [Signature]

OFFICE USE ONLY

Candidate Oath

Name as it is to appear on ballot: NATHAN TOCCO

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 office of ☒ **Committeeman** ☐ **Committeewoman**

I am a qualified elector of DUVAL County, Florida; I am qualified under the Constitution and the laws of Florida to hold the office to which I desire to be nominated or elected; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Statement of Party

I swear or affirm that I am a member of the REPUBLICAN Party; I have been a registered member of this political party, for which I am seeking nomination as a candidate, for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, by the executive committee of the above-stated political party.

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.

X [Signature] (904) 309-1925 NATHANTOCCO1@GMAIL
Signature of Candidate Telephone Number Email Address
109 SEAGRAPE DRIVE JACKSONVILLE BEACH FLORIDA 32250
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF Duval

Sworn to (or affirmed) and subscribed before me by means of
online notarization ☐ OR physical presence ☒

this 13th day of June, 2024

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____

[Signature]
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

