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:

Write in candidate

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2022 JUN 13 PM 2: 37

BUPERVISOR OF ELECTIONS HERNANDO COUNTY, FL

vvrite-in candidate		110.1000	OFFICE USE ONLY
Candidate Oath (Section 99.021(1)(a), Florida Statutes)			
I, Pat Brayton			
(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box [] (see page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)			
am a candidate for the nonpartisan office of Brooksville City Council			
		(Office)	(District #)
(Circuit #) , 5 ; I am a qu	ualified elector of	Hernando	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; I
have qualified for no other public office in the			
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	d States and the	Constitution of the State of F	lorida.
Candidate's Florida Voter Registration Number (located on your voter information card): 104388180			
Phonetic spelling for audio ballot : Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]			
Pat Bray-ton			
X CAS X	(352) 796-4	340 pbrayt	on@tampabay.rr.com
Signature of Candidate	Telephone Number	, :	Email Address
205 Alpine CIrcle	Brooksville	FL	34601
Address	City	State	ZIP Code
STATE OF FLORIDA		Telli Ca	HER.
COUNTY OF TERNANDO		Signature of Notary Pu Print, Type, or Stamp Commis	IDIIC sioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me b	ov means of		
online notarization OR physical pre	k -/ î		L. CARTER
this day of Oll D	, 20) ()	Expire	ission # HH 133424 s September 24, 2025
Personally Known OR Produced Identif	ication	*** Bonded	Thru Troy Fain Insurance 800-385-7019
Type of Identification Produced:			