CANDIDATE OATH STATE AND LOCAL PARTISAN OFFICE WITH PARTY AFFILIATION

RECEIVED

2024 JUN 10 PM 12: 05

TERMISOR OF FLECTION OFFICE USE ONLY

	Candidate	e Oath	WHITEL
Name to appear on ballot: Denis	e LaVancher	- n e e	5. (a. *
Check bax	if two last names without hyphen.	(Name cannot be changed a	fter qualifying.)
Check box if name includes nickna	me. (For use of a nickname	s, you must complete the Nicknam	e Affidavit on reverse side.)
I swear or affirm that I am a candidate f	or the office of Su	upervisor of Elections (Office)	(District #)
(Circuit #) (Group or Seat #)	; I am a qualified elector of _	Hernando	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 Party			
I swear or affirm that I am a member of party, for which I am seeking nomination which I seek to qualify; and I have paid to party.	as a candidate, for 365 days be	efore the beginning of qualifying	
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 NotX If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.			
X Signature of Candidate 16071 Dracena Drive Address of Legal Residence	(352)540-7304 Telephone Number Brooksville City	VoteD Florida State	eniseLaVancher@gm Email Address 34604 ZIP Code
STATE OF FLORIDA COUNTY OF Hernande Sworn to (or affirmed) and subscribed be		Signature of Notary Public Print, Type, or Stamp Commission	
online notarization OR phy this 31 day of May	rsical presence	MELISSA M. V. Commission # I Expires July	IH 286236
DS-DE 3014 (Eff. 10/2023)			Rule 1S-2.0001, F.A.C.

Phonetic Spelling of Name				
Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):				
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Statement of Outstanding Fines, Fees or Penalties				
Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.				
Amount	Entity			
Affidavit of Nickname (Only required if using nickname for the ballot.)				
My legal name is				
My nickname is I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.				
Signature of Candidate :				
STATE OF FLORIDA	Malal /			
COUNTY OF Hernando Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public belo				
Sworn to (or affirmed) and subscribed be				
of online notarization OR phy	vsical presence			
this 31 day of May , 2024. MELISSAM. VANNETTA				
Personally Known OR Produced Identification Commission # HH 286236 Expires July 11, 2026				
Type of Identification Produced:				

DS-DE 301A (Eff. 10/2023)

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