CANDIDATE OATH -				
STATE AND LOCAL PARTISAN OFFICE	RECEIVED			
Check applicable one:	2018 JUN 20 PM 5 10			
Candidate with party affiliation				
Candidate with no party affiliation	SUPERVISUAL FURCTIONS			
│ Write-in candidate	OFFICE USE ONLY			
Candidate Oath				
(Section 99.021(1)(a), Florida Statutes)				
I, <u>CANSACE LUTHER</u> (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 office of County CommissionER AT-LANGE (, , , , , , , , , , , , , , , , , , ,				
(Office ; I am a qualified elector of				
(Group or Seat #)				
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				
	any part thereof runs concurrent with the office I seek; and I have ursuant to Section 99.012, Florida Statutes; and I will support the			
Constitution of the United States and the Constitution of the S				
Statement of Party (Section 99.021(1)(b), Florida Statutes)				
(Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)				
I am a member of the <u>NON PARTISAN</u> Party; I have not been a registered member of any other political				
party for 365 days before the beginning of qualifying precedin	g the general election for which I seek to qualify; and I have paid			
the assessment levied against me, if any, as a candidate for sa	aid office by the executive committee of the political party, of which			
l am a member.				
Candidate's Florida Voter Registration Number (located on your voter information card):				
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.] $Kan - Dis Loo - THuhr$				
X (94) 32 - Signature of Candidate Telephone Number 4317 7474 AVE E. SANASOTA Address City	7419 Candyluther 2018 egnail.com Email Address FL, 34243 1 State ZIP Code			
STATE OF FLORIDA	Signature of Notary Public			
COUNTY OF MANATEE.	Print, Type, or Stamp Commissioned Name of Notary Public below:			
Sworn to (or affirmed) and subscribed before me this 20 %				
day of, 20_/8.	Expines April 11, 2020 Bonded Thru Troy Fein Insuranes 800-386-7019			
Personally known: or Produced Identification:				
Type of Identification Produced: <u><i>H. D.L.</i></u>				

DS-DE	301SL	(Rev.	11/17)	