CANDIDATE OATH -	0
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	REACHAR
write-in candidate:	RECEIVED
Write-in candidate	2018 JUN 18 PM 12 28
OFFICE USE ONLY	
Candidate Oath	
(Section 99.021(1)(a), Florida Statutes)	
1, Rob Bell	
(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	BOFC S
	(Office) (District #)
, 3; I am a qualified elector of Manatee County, Florida;	
(Circuit #) (Group or Seat #)	
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 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.	
Candidate's Florida Voter Registration Number (located on your voter information card):S315929	
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.]	
X Loum. Bll (941) 321-03	30 bellrabm@amail.com Email Address
Signature of Candidate Telephone Number	Email Address
3617 57th Street East Palmetto	FL 34821
Address City	State ZIP Code
STATE OF FLORIDA	Signature of Notary Publi¢
COUNTY OF Manatee	Print, Type, or Stamp Commission And Name of Notary Public below:
Sharona stref	
Sworn to (or affirmed) and subscribed before me this <u>Hh</u> day of <u>une</u> , 20 <u>8</u> .	
0	Bonied Tiru Troy Fain Insurance 800-305-7018
Personally Known: or Rroduced Identification:	
Type of Identification Produced:	
DS-DE 302NP (Rev. 11/17)	Rule 1S-2.0001, F.A.C.

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