

**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

RECEIVED

2018 JUN 18 PM 12 25

OFFICE USE ONLY

**Candidate Oath**

(Section 99.021(1)(a), Florida Statutes)

I, MICHAEL D HOLDERNESS

(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 CELESTHAMMOCK FIRE COMMISSION, \_\_\_\_\_  
(Office) (District #)

\_\_\_\_\_ , 4 ; 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): 0722002 105330826  
ID # 18411

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.]  
MICHAEL B HOLDERNESS

X [Signature] (941) 359-9797 DONZI MIKE HOSAN@gmail.com  
Signature of Candidate Telephone Number Email Address

7126 WESTMORELAND DR SARASOTA FL 34243  
Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF Manatee

Michele R. Lillis-Medina  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_  
day of June 5, 2018.

Personally Known:  or Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_

