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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| | OFFICE USE ONLY |
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| Candidate Oath (Section 99.021(1)(a), Florida Statutes) | |
| 1, Holly B Combee NC | |
| (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 Harrish | Fire District Commission (District #) |
| (Circuit #) (Group or Seat #) ; I am a qualified elector of | Manatee County, Florida; |
| I am qualified under the Constitution and the Laws of Florida t | o 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 o | f which office or any part thereof runs concurrent with the office |
| I seek; and I have resigned from any office from which I am r | equired 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): 1055/8813 Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio | |
| | ns on page 2 of this form): [Not applicable to write-in candidates.] |
| x Half Combec (941) 737- | 5567 gettinhitched Flog acl. com |
| Signature of Candidate Telephone Number | Email Address |
| Address City | 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 19th day of, 20 | KAREN JONES Commission # FF 980860 Expires April 11, 2020 Bonded Titru Troy Feln Insurance 800-385-7019 |