

**CANDIDATE OATH
STATE AND LOCAL PARTISAN OFFICE
WITH PARTY AFFILIATION**

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2024 JUN 13 AM 11:24

MANATEE COUNTY
SUPERVISOR OF ELECTIONS OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: James Satcher

Check box if two last names without hyphen. ☐ (Name cannot be changed after qualifying.)

Check box if name includes nickname. ☐ (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the office of Supervisor of Elections ☒ Manatee County, Florida;
(Office) (District #)
(Circuit #) (Group or Seat #); I am a qualified elector of

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 the Republican Party; I have been a registered member of this political party, for which I am seeking nomination as a candidate, for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, by the executive committee of the above-stated political party.

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 Not ☒

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X James Satcher () james@jamesatcher.com
Signature of Candidate Telephone Number Email Address
5325 74th Pl E Ellenton FL 34222
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF Manatee

Sworn to (or affirmed) and subscribed before me by means of
online notarization ☐ OR physical presence ☒
this 13th day of June, 2024.

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____

Sharon Stief
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

