

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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MANATEE COUNTY OFFICE USE ONLY
SUPERVISOR OF ELECTIONS**Candidate Oath**Name to appear on ballot: Denise BroyhillCheck 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 nonpartisan office of University Place Community Improvement District, (Office) (District #)
 Seat 2 ; I am a qualified elector of Manatee County, Florida.
(Circuit #) (Group or Seat #)

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 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 Denise Broyhill (302) 668-5494 dbroyhill99@gmail.com
Signature of Candidate Telephone Number Email Address
8107 Spring Marsh Drive University Park FL 34201
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 10 day of June, 2024.Personally Known ☐ OR Produced Identification ☒Type of Identification Produced: Florida Driver License

Christopher Steiner
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

