## CANDIDATE OATH – SCHOOL BOARD NONPARTISAN OFFICE

Check box **only** if you are seeking to qualify as a write-in candidate:

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2018 JUN 18 PM 12: 06

SUPERVISOR OF ELECTIONS MARION COUNTY, FLORIDA

Write-in candidate	
	OFFICE USE ONLY
Candidate Oath (Sections 99.021(1)(a) and 105.031, Florida Statutes)	
(Sections 99.021(1)(a) and 105.031, Florida Statutes)	
1, Donnie Prophet	
(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	School Board , 3 ,
	(Office) (District #)
, ; I am a qualified elector	of Marion 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.	
Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the school board and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.	
Candidate's Florida Voter Registration Number (located on your voter information card):117472510	
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 Dry Jab (786) 708-1754	dprophet327@gmail.com
Signature of Candidate Telephone Number	Email Address
237 Marion Oaks Lane Oc	cala, FL, 34473
Address City	State ZIP Code
STATE OF FLORIDA	Kim Hankemeyer
COUNTY OF _Marion	Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me this / 4/4 day of, 20_/8  Personally Known: or Produced Identification:  Type of Identification Produced:	KIM MARIE HANKEMEYER Commission # FF 219641 My Commission Expires June 27, 2019
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CAUTH IN ALECTION