CANDIDATE OATH STATE AND LOCAL PARTISAN OFFICE

Check applicable one:

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2020 JUN -8 PM 12: 09

	SUPERVISOR OF ELECTIONS MARION COUNTY, FLORIDA
☐ Candidate with no party affiliation	TAMON COUNTY, FLORION
☐ Write-in candidate	
	OFFICE USE ONLY
Candidate Oath	
(Section 99.021(1)(a), Florida Statutes)	
(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 office of Property Appraiser	
(Office	
; I am a qualified elector of	Marion County, Florida; I am qualified
(Group or Seat #)	
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	
Appendix and the second	1)(b), Florida Statutes)
(Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)	
I am a member of the Republican Party; I have not been a registered member of any other political	
party 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, as a candidate for said office by the executive committee of the political party, of which	
am a member.	
Candidate's Florida Voter Registration Number (located on your voter information card): 105706688	
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.]	
american may be used by personal man disabilities (see mended on page 2 of time form). [Not approable to write in darial action.]	
X 8 / Mure (352) 877.	-3099 votedavidmoore@yahoo.com
Signature of Candidate Telephone N	
1124 SE 33rd Ave Ocala	FL 34471
Address City	State ZIP Code
STATE OF FLORIDA	Van Hankemer
COUNTY OF Marion	Signature of Notary Public
Sworn to (or affirmed) and subscribed before me by physical or	
20th Mari	
Personally Known: or Produced Identification:	KIM HANKEMEYER NOTARY PUBLIC
Type of Identification Produced: R Drue License	STATE OF FLORIDA NO. GG 333382
	MY COMMISSION EXPIRES JUN. 27, 2023