CANDIDATE OATH PRECINCT COMMITTEEMEN AND COMMITTEEWOMEN

RECEIVED

2016 JUN 21 AM 9: 39

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY OATH OF CANDIDATE (Section 99.021, Florida Statutes) (PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * -- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING) am a candidate for the office of Precinct Committeeman Committeewoman I am a qualified elector of Mom Dod County, Florida; I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; 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): 121055137 * Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form): STATEMENT OF PARTY (Section 99.021, Florida Statutes) emocratic I am a member of the 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 I am a member. Signature of Candidate **Telephone Number Email Address** STATE OF FLORIDA COUNTY OF MICL Sworn to (or affirmed) and subscribed before me this _____ day of Personally Known: Signature of Notary Public Produced Identification: Print, Type, or Stamp Commissioned Name of Notary Public Type of Identification Produced: JUAN CARLOS CUBA MY COMMISSION #FF974175 **EXPIRES: APR 15, 2020**

Bonded through 1st State Insurance