

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)

I, Stefanye Sass
(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 Precinct Number 20

I am a qualified elector of Miami Dade 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): 120218772

* 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):

Stef-ah-ree sass

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Democratic Party 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.

X [Signature] (413) 472-3165 Stefanye Sass@gmail.com
Signature of Candidate Telephone Number Email Address

6770 Indian Creek Dr #12E MIAMI BEACH FL 33124
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF MIAMI DADE

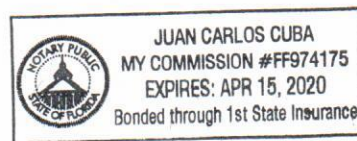
Sworn to (or affirmed) and subscribed before me this 13 day of MAY, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



120218772, Sass, Stefanie B (Maint)

DAD 120218772 Sass, Stefanie B 6770 Indian Creek Dr, APT 12E, Miami Beach, 33141 120218772

Last Name: **Sass** Style: First: **Stefanie** Middle: **Beth** Driver License: **S200-782-90-605-1** Source: **H, HSMV** Soc Sec Num: Source: **F, Form**
 Nbr: **6770** Suf: Dir: Street Name: **Indian Creek** Type: **Dr** Dir Suf: Unit Type: **APT** Nbr: **12E** City Name: **Miami Beach** County: **MIAMI-DADE** Zip Code: **33141**
 Mail:

City: State: Zip Code: Country:

Email Address:

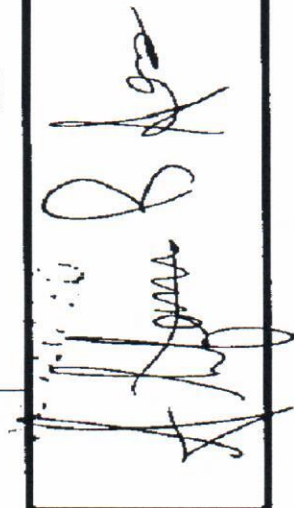
Receive Sample Ballots by Email

Sex: **F** Race: **5, White, not Hispanic** Party: **DEM, Florida Democratic Party** Reason (Status): **1(A) Active Voter**
 Date of Birth: **03/25/1990** Birth Place: **US** Telephone: **(239)246-3945** Ext:
 Party Chg Req Dte: **/ /** Regn Date: **09/17/2012** See Comms

Districts						
Precinct	Cng	Sen	Hse	CC	SB	Wrd
020.0	27	38	113	5	3	MIAMI BEACH

- Assistance? EW Interest?
- Addr Protect? Fed Elections Only
- ID Required to Vote Photo Id Seen

Photo ID Type:

	Date 5/19/14
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