CANDIDATE OATH PRECINCT COMMITTEEMEN AND COMMITTEEWOMEN

RECEIVED

2016 JUN 23 PM 1: 04

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

OFFICE USE ONLY

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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 Precinct Number <u>672</u> ,			
I am a qualified elector of 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):			
* 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):			
Anthony F Petisco			
STATEMENT OF PARTY (Section 99.021, Florida Statutes)			
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. (300 342 696 Telephone Number Enal Address			
Signature of Candidate	Telephone Number		Email Address
5981 SW 48 St. Address	City	State	33155 ZIP Code
STATE OF FLORIDA			
COUNTY OF MICHIEL Dade			
Sworn to (or affirmed) and subscribed before me this <u>all</u> day of <u>ture</u> , 20 <u>ll</u> .			
Personally Known: or			
Produced Identification:		Signature of Nota Print, Type, or Star	mp Commissioned Name of Notary Public
Type of Identification Produced:			KARANTON PARAMETER AND
			MAX VILELLA COMMISSION #FF038661 EXPIRES: JUL 22, 2017 ed through 1st State Insurance