## **CANDIDATE OATH -**PRECINCT COMMITTEEMEN AND COMMITTEEWOMEN

## RECEIVED

2016 JUN 23 AM 9:01

MIAMI-DADE COUNTY ELECTIONS DEPARTMENT

| OFFICE USE ONLY  |
|--|
| OATH OF CANDIDATE (Section 99.021, Florida Statutes)  I, (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 I am a qualified elector of Mirani - 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): 110 337 79 6   |
| * 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)  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.    X |
| STATE OF FLORIDA COUNTY OF   |