CANDIDATE OATH PRECINCT COMMITTEEMEN AND COMMITTEEWOMEN

RECEIVED

2016 JUN 23 AM 9: 00

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 70+ I am a qualified elector of Man - 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): 15234593			
* 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):			
Le-ven R Gon-Za-lez			
I am a member of the party for 365 days before the beginning the assessment levied against me, if an which I am a member. Signature of Candidate Address	of qualifying preceding the ger y, as a candidate for said off (7%6) 252-0 Telephone Number	ave not been a registeral election for which ce by the executive	stered member of any other political
SWARD to (or officered) and subscribed	hofore we thin (1)	. 140	
Sworn to (or affirmed) and subscribed before me this 2\ day of \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Produced Identification:		Signature of Nota Print, Type, or Sta	ary Public mp Commissioned Name of Notary Public
Type of Identification Produced:			
		MY B	JUAN CARLOS CUBA COMMISSION #FF974175 EXPIRES: APR 15, 2020 ed through 1st State Insurance