| MIAMI-DADE COUNTY | OFFICE USE ONLY | | | | | |
|--|--|--|--|--|--|--|
| CANDIDATE OATH – | Proof of residency provided: | | | | | |
| NONPARTISAN OFFICE | Proof of residency provided: | | | | | |
| (Do not use this form if a Judicial or School Board Candidate) | Driver's License Utility Bill | | | | | |
| Check box <i>only</i> if you are seeking to qualify as a write-in candidate: | Voter Information Card Homestead Exemption Receipt | | | | | |
| ☐ Write-in candidate | ☐ Property Tax Receipt ☐ Lease Agreement | | | | | |
| | | | | | | |
| CANDIDATE OATH (Section 99.021, Florida Statutes) Le l'insler | | | | | | |
| (Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 – Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.) | | | | | | |
| am a candidate for the nonpartisan office of M. an: Darle County Comm, Sing (District/Group/Seat #) | | | | | | |
| I am a qualified elector of Miami-Dade County, Florida; I am qualified under the Constitution and the Laws of Florida and the Home Rule Charter of Miami-Dade County to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and will support the Constitution of the United States and the Constitution of the State of Florida. | | | | | | |
| I affirm that I am a resident of Miami-Dade County, meet the minimum residency requirements for the office, and submitting proof of my residency in the district for the prescribed period. Under penalties of perjury, I declare that there read the foregoing Oath of Candidate and that the facts stated in such are true. | | | | | | |
| Candidate's Florida Voter Registration Number (located on your voter information card): | | | | | | |
| Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.] Mones tea Lee Lins ler | | | | | | |
| | | | | | | |
| x Montaine 14 | 04 207 - 7695 | | | | | |
| Signature of Candidate Tele | phone Number Email Address | | | | | |
| 1162 NW 77thsh | Miani, FL 33150 | | | | | |
| Address City | State ZIP Code | | | | | |
| STATE OF FLORIDA | | | | | | |
| COUNTY OF Mismi-Dode | ANNE VANESSA INNOCENT | | | | | |
| Sworn to (or affirmed) and subscribed before me by physical o | My Comm. Expires Juli 2, 2022 | | | | | |
| online ☐ presence this 12 ⁷⁴ day of | , 20_2. Bonded through National Notary Assn. | | | | | |
| Personally Known:or | Anne Jamesse Jamocent | | | | | |
| Produced Identification: | Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public | | | | | |
| Type of Identification Produced: Flysids Devide Lines of | | | | | | |



2020 MAY 12 PM 12: 49 RECEIVED

OFFICIAL RECEIPT MIAMI-DADE COUNTY-FLORIDA

No. 7900451

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2020 MAY 12 PM 12: 56

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT