

**MIAMI-DADE COUNTY
CANDIDATE OATH –
NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

OFFICE USE ONLY

Proof of residency provided:

- Driver's License
- Voter Information Card
- Property Tax Receipt
- Utility Bill
- Homestead Exemption Receipt
- Lease Agreement

CANDIDATE OATH

(Section 99.021, Florida Statutes)

I, Williams Alfred Armbrister Sr.

(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 Miami-Dade County Mayor (Office) (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 I 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 this office, and submitting proof of my residency in the district for the prescribed period. Under penalties of perjury, I declare that I have 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): 109046208

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.]

Will-E-Yums / Al-Fred / Arm-bris-ter

X Wm. A. Armbrister Sr. (305) 205-6440 brotherarmr12@yahoo.com
 Signature of Candidate Telephone Number Email Address
3260 THOMAS AVENUE MIAMI, FLORIDA 33133-5896
 Address City State ZIP Code

STATE OF FLORIDA
 COUNTY OF Miami Dade



Sworn to (or affirmed) and subscribed before me by physical or
 online presence this 21 day of May, 2020.

Personally Known: _____ or

Produced Identification: X

Type of Identification Produced: FLDL

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

RECEIVED

2020 MAY 26 AM 9: 09

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

Florida DRIVER LICENSE USA CLASS E

1 ARMBRISTER
2 WILLIAMS ALFRED
3 3260 THOMAS AVE
COCONUT GROVE, FL 33133

4 DOB 11/08/1951 15 SEX M
4b EXP 11/08/2027 16 HGT 6'-00"
12 REST A 9b END A

4a ISS 11/05/2019
5DD [REDACTED]

Wm. A. Armbrister Operation of a motor vehicle constitutes consent to any sobriety test required by law.

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Voter Information Card
Miami-Dade County, FL
Tarjeta de Información del Elector
Condado de Miami-Dade, FL

Kaŕ Enfòmasyon Votè
Konte Miami-Dade, FL

ISSUED
EMITIDA
ENPRIME
11/20/15

Registration No.
Núm. de Inscripción
Nim. Enskripsyon
109046208

Williams Alfred Armbrister SR
3260 Thomas Ave
Miami FL 33133

Bring photo identification
when voting.
Para votar, presente una
identificación con fotografía.
Tapri pote yon pyès idantifikasyon
ki gen foto w sou li lè w'ap vîn vote.

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