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
	☐ Voter Information Card ☐ Homestead Exemption Receipt
Check box <i>only</i> if you are seeking to qualify as a write-in candidate:	☐ Property Tax Receipt ☐ Lease Agreement
☐ Write-in candidate	_
CANDIDATE OATH	
(Section 99.021, Florida Statutes)	
1, PHIUPPE MEN- ATME	
(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 $\Box$ .	
(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 MIGIM Date DUNTY (DIMMISSIONE) DISTRICTO	
(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 Elevida Voter Pegistration Number (located on you	in viotar information cardly 114675497
Candidate's Florida Voter Registration Number (located on your voter information card): 1146/544	
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.]	
TILIA BUNEME	
M Chiqil. Co	
X Philable from + 1305 399 3338 Philadebracine 1470	
Signature of Candidate / Tele	phone Number // Email Address
70 N/= 1345+ NOWH	Mealur FC 33/6/
Address City	State ZIP Code
STATE OF FLORIDA	
COUNTY OF Mismi - Dade	
Sworn to (or affirmed) and subscribed before me by physical $\overline{\mathcal{O}}$ or	
online Opresence this <u>23</u> day of <u>Mey</u> , 20 <u>22</u> .	
Personally Known:or	Anne Vinesso Anno and
Produced Identification:	Signature of Notary Public Print, Type, or Stamp Commissioned Names Ali Motary Ruckley
	Notary Public - State of Florida  ANNE VANCESSATING CENT  Notary Public - State of Florida  Commission # GG 211908
Type of Identification Produced: Florido Dniver License	My Comm. Expires Jun 2, 2022

Bonded through National Notary Assn.

## RECEIVED

2022 MAY 23 PM 2: 27

MAHI-DADE COUNTY ELECTIONS DEPARTMENT

