

OATH OF WITHDRAWAL

| Date: 05/79/7074 | | | | |
|---|-------------------------------------|-------------------------|---------------------|-----------|
| I, JASPEN BISHOP | , have filed as a candidate for the | | | |
| office of MIAMI-DADE COUNTY SHERTA | F | | | · |
| I wish to withdraw my name as a candidate for this office and I will requalification papers. | not accept th | e office f | or which | h I filed |
| | | | | |
| Signature of Candidate | | | | |
| P. O. 130X GOOG 7 Z Address HOMESTEAI) City | | | | |
| HOMESTEA! | State | | 33 Zip | 090 |
| Sworn to (or affirmed) and subscribed before me by physical or online presence this 29 day of | | MIAMI-DADE FLECTIONS | 2024 MAY 29 PM 1:53 | RECEIVED |
| Type of Identification Produced DL F/. | - 1 | N 9-10 | | |

Candidate Withdrawal Policy

The deadline for any candidate to withdraw is the end of qualifying. No qualifying fee shall be returned to the candidate unless the candidate withdraws his or her candidacy before the end of their qualifying period.

(Reference: Florida Statutes 99.092)