

LOYALTY OATH

(Sections 876.05-876.10, Florida Statutes)

NON-PARTISAN OFFICE

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

OFFICE USE ONLY

RECEIVED

2010 JUN -8 PM 4:53

FLORIDA
ELECTIONS SECRETARY

I,

Mary

First Name

Middle Name/Initial

DIAZ

Last Name

a citizen of the State of Florida and of the United States of America, and being [a candidate for public office] do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Important: If elected, a candidate must retake the loyalty oath as specified in s. 876.05, Florida Statutes, and that oath shall be filed with the records of the governing official or employing governmental agency prior to the approval of payment of salary, expenses, or other compensation.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I,

Mary Diaz

(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 non-partisan office of Board Supervisor, Seat #2, _____, _____

(office)

(district)

_____, _____; I am a qualified elector of Islands at Doral(SW) CDD Miami-Dade County, Florida;

(circuit)

(group)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; by executing this form, I have taken the oath required by ss. 876.05-876.10, Florida Statutes; 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.

X

Signature of Candidate

Telephone Number

Email Address

7843 NW 112 PL

Address

Miami

City

FL

State

33178

ZIP Code

Sworn to (or affirmed) and subscribed before me this 12th day of MAY, 20 10.

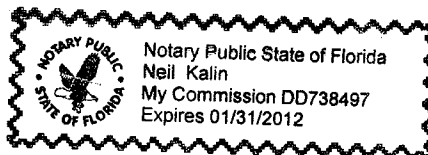
Personally Known: _____ or

Produced Identification: _____

Type of Identification Produced: _____

Signature of Notary Public – State of Florida

Print, Type, or Stamp Commissioned Name of Notary Public



**Receipt of Handbook and the
Election Laws of the State of Florida**



Candidate/Chairperson:

Mary DIAZ
First Name Middle Name Last Name

BOARD SUPERVISOR - ISLANDS AT DORAL(SW) COMMUNITY DEVELOPMENT DISTRICT

Office Sought / Organization

Seat 2 HH

This is to acknowledge my receipt of the following documents:

Handbooks Available	Edition	Downloaded from Internet	CD-Rom	Other
The Election Laws of the State of Florida		<input type="checkbox"/>	<input type="checkbox"/>	
— Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	reviewed online
Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	
Electioneering Committee Handbook		<input type="checkbox"/>	<input type="checkbox"/>	

Received by:

Mary Diaz

Candidate/Chairperson Signature

Date:

5/12/2010

Phone No.:

305 - 804-7931

Fax No.:

E-mail address:

Mdiaz199@yahoo.com

