

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



Candidate/Chairperson:

John C. DeMott
First Name Middle Name Last Name
Supervisor / S. Dade Soil & Water
Office Sought / Organization

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 checked="" type="checkbox"/>	<input type="checkbox"/>	
Miami-Dade County Qualifying Handbook		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Committee Handbook			<input type="checkbox"/>	
Electioneering Committee Handbook			<input type="checkbox"/>	

Received by: [Signature]
Candidate/Chairperson Signature

Date: June 17, 2010

Phone No.: 305 248 5109 Fax No.: 305 248 2180

E-mail address: RedLand @ RedLand Nursery.com

RECEIVED
10 JUN 18 AM 8:53
MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

<p style="text-align: center;">LOYALTY OATH (Sections 876.05-876.10, Florida Statutes)</p> <p style="text-align: center;">NON-PARTISAN OFFICE</p> <p>STATE OF FLORIDA COUNTY OF <u>MIAMI Dade</u></p>	<p style="text-align: center;">OFFICE USE ONLY</p> <p style="text-align: center;">10 JUN 18 AM 8:53</p> <p style="text-align: center;">MIAMI-DADE COUNTY ELECTIONS DEPARTMENT</p>
<p>I, JOHN C. DEMOTT</p> <p style="text-align: center;">First Name Middle Name/Initial Last Name</p>	
<p>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.</p> <p>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.</p>	
<p style="text-align: center;">OATH OF CANDIDATE (Section 99.021, Florida Statutes)</p> <p>I, <u>John C. DeMott</u> SEAT #5</p> <p style="text-align: center;"><small>(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING PERIOD)</small></p> <p>am a candidate for the non-partisan office of <u>S. Dade Soil & Water Conservation</u> MIAMI</p> <p style="text-align: center;"><small>(office)</small> <small>(district)</small></p> <p><u>Miami Dade</u> SEAT County, Florida;</p> <p><small>(circuit)</small> <small>(group)</small></p> <p>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.</p>	
<p><input checked="" type="checkbox"/> <u>[Signature]</u> Redland@</p> <p style="text-align: center;"><small>Signature of Candidate</small> <small>RedlandNursery.com</small></p> <p><u>18455 SW 2645th - Homestead FL</u> 33031</p> <p style="text-align: center;"><small>Address</small> <small>City</small> <small>State</small> <small>ZIP Code</small></p>	
<p>Sworn to (or affirmed) and subscribed before me this <u>17th</u> day of <u>June</u>, 20 <u>10</u>.</p> <p>Personally Known: <input checked="" type="checkbox"/> or</p> <p>Produced Identification: _____</p> <p>Type of Identification Produced: _____</p>	
<p><u>Susan A. Theisen</u></p> <p><small>Signature of Notary Public - State of Florida</small></p> <p><small>Print, Type, or Stamp Commissioned Name of Notary Public</small></p>	
<p>NOTARY PUBLIC-STATE OF FLORIDA</p> <p>Susan Ann Theisen</p> <p>Commission # DD910965</p> <p>Expires: AUG. 13, 2013</p> <p><small>BONDED THRU ATLANTIC BONDING CO., INC.</small></p>	

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