CANDIDATE OATH - Some Mittas	Campound
NONPARTISAN OFFICE	your <u>est</u> hame consists of two or more names and has no him
(Do not use this form if a Judicial or School Board Candidate)	check the box your name will be stad with the name appearing to to twatee and you do not prevision now the test mame on the bo
Check box only if you are seeking to qualify as a	nin two enquire near both order 8 OSC SOE JUN8'2013:15 er
write-in candidate:	Guide for Designedin
Write-in candidate	of Candidate's Nan
	OFFICE USE ONLY
Candid	ate Oath
(Section 99.021(1))(a), Florida Statutes)
I, ANDELA CADY	N/OV
	t. If your last name consists of two or more names but has no Names). No change can be made after the end of qualifying. ballot, the name must be printed above for oath purposes.)
am a candidate for the nonpartisan office of <u>MAUDR</u>	Office (DMMSSIDNA (District #)
, ; I am a qualified elector of	OSCOLIG (OLINT County, Florida;
(Circuit #) (Group or Seat #)	
	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	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.
Candidate's Florida Voter Registration Number (located on ye	our voter information card): <u>/ 0 6 / 5 9 8 4 4</u>
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.] A na ela. Eady	
	Laborated a second and a second as a s
Signature of Candidate HD 972 Signature of Candidate Telephone Number	9.7049 angelacady 825 Cyahoo Email Address
1352 BUCKIA BOL. KIAA.	A. 34744
Address City	State ZIP Code
Mary and Starts (V) studies A	A PDAM RING
STATE OF FLORIDA	egomaine
COUNTY OF OSCEOLA	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by physical or	CAITLIN A. GERMAINE MY COMMISSION # GG 093903
online presence this <u>3</u> day of <u>JUNC</u> , 2020 .	EXPIRES: April 12, 2021 Bonded Thru Notary Public Underwriters
Personally Known: or Produced Identification:	
Type of Identification Produced:	
The second s	

DS-DE 302NP (Rev. 04/20)

Rule 1S-2.0001, F.A.C.