

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Do not use this form if a Judicial or School Board Candidate)

Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

OSC SOE JUN8'2013:18

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Nathan Blackwell

(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 ☐. (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 Mayor, St. Cloud City Council Seat 1, _____, _____
(Office) (District #)

_____, Seat 1; I am a qualified elector of Osceola ☐ County, Florida;
(Circuit #) (Group or Seat #)

I am qualified under the Constitution and the Laws of Florida 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 106171255

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.]

NATHAN BLACKWELL

X Nathan Blackwell (321) 624-2745
Signature of Candidate Telephone Number

blackwell4mayor@gmail.com
Email Address

3864 Marietta Way
Address

St. Cloud
City

FL
State

34772
ZIP Code

STATE OF FLORIDA

COUNTY OF Osceola

Sworn to (or affirmed) and subscribed before me by ☒ physical or
☐ online presence this 3 day of June, 2020.

Personally Known: _____ or Produced Identification: ☒

Type of Identification Produced: _____

C. Germaine
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

