

**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

JUN 9 '20 PM1:08
OSC SOE

OFFICE USE ONLY

Candidate Oath

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

I, Badia Strachan

(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 Concorde Estates Assistant Secretary Cdd,
(Office) (District #)

Seat #4; 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): 125408296

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.]

Ba-die-yah

X Badia Strachan

Signature of Candidate

(845) 380-5868 parkviewatlakeshorevpc@gmail.com

Telephone Number

Email Address

3081 Harbor View Ln

Kissimmee

FL

34746

Address

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF ORANGE

Sworn to (or affirmed) and subscribed before me by ☒ physical or

☐ online presence this 29 day of MAY, 2020.

Personally Known: _____ or Produced Identification: X

Type of Identification Produced: FLORIDA DRIVER LICENSE

JOSE ALBERTO CARRERO BORRERO

Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:



JOSE ALBERTO CARRERO BORRERO
Notary Public, State of Florida
Commission# GG 354727
My comm. expires July 15, 2023