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

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	OFFICE USE ONLY
Candidate Oath (Section 99.02)(1)(a), Florida Statutes) I, Steven M Story	
(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	
am a candidate for the nonpartisan office of	(Office), (District #)
(Circuit #) (Group or Seat #); I am a qualified elector of	(2.0000.0)
l am qualified under the Constitution and the Laws of Florida t	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	f which office or any part thereof runs concurrent with the office
	equired 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): 121522 807	
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.]	
X Staff Della (3/4) 40 9 Signature of Candidate Telephone Number	2055 SM9CMaCgmail.Com
1532 Fustan Pr Reunion	
Address City	State ZIP Code
STATE OF FLORIDA	Coxumanie
COUNTY OF OSCEOLO	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
online presence this day of, 20	MY COMMISSION # GG 093903
Personally Known: or Produced Identification:	Bonded Thru Notary Public Underwriters
Type of Identification Produced:	