## 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

RECEIVED

2018 JUN 21 PM 2: 26

BRIAN E. CORLEY SUPERVISOR OF ELECTIONS LAND O'LAKES, FLORIDA

OFFICE USE ONLY

	Candidate	Oath	
Clistano, C	(Section 99.021(1)(a), Flo	orida Statutes)	
I, Christopher	1. 1940		
hyphen, check box . (See particular conditions of the second seco	page 2 - Compound Last Name name is not printed on the ballot	s). No change can . the name must be i	ts of two or more names but has no be made after the end of qualifying. printed above for oath purposes.)
am a candidate for the nonpartisan	office of Ballantra	e CDD	, , , , , , , , , , , , , , , , , , ,
		(Office)	(District #)
SEAT 3	; I am a qualified elector of	PASCO	County, Florida;
(Circuit #) (Group or Seat #)			
I am qualified under the Constitution	on and the Laws of Florida to hole	d 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 a	ny office from which I am require	ed to resign pursuan	t to Section 99.012, Florida Statutes;
and I will support the Constitution of	of the United States and the Cons	stitution of the State	of Florida.
Candidate's Florida Voter Registra	ation Number (located on your vo	ter information card)	107215575
	acion Hamber (located on your vo	tor information card).	
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.]			
ballot as may be used by persons wit	th disabilities (see instructions on		
ballot as may be used by persons wit	th disabilities (see instructions on		
ballot as may be used by persons wit	th disabilities (see instructions on	page 2 of this form):	[Not applicable to write-in candidates.]
ballot as may be used by persons with KAIS-TA-FER	th disabilities (see instructions on MILL-Aルーの	page 2 of this form):	
ballot as may be used by persons with KAIS-TA- FER	th disabilities (see instructions on MILL-AN-O	page 2 of this form):	milenanction @ gmail. com
X Signature of Candidate	th disabilities (see instructions on MILL-Aルーの (名ロ) りょらっらっち	page 2 of this form):	Email Address  ZIP Code
X Signature of Candidate  39 LG DUKE FIRTH ST	th disabilities (see instructions on MILL-AN-O  (81) 926-678  Telephone Number  (AN) の (AKES)  City	page 2 of this form):	Email Address  2IP Code
X Signature of Candidate  39 LG DOKE FIRTH ST  Address	th disabilities (see instructions on MILL-AN-O  (81) 926-678  Telephone Number  (AND O CARES  City	State  State  Gnature of Notary I	Email Address  2IP Code
Signature of Candidate  39 LG DOKE FIRTH ST  Address  STATE OF FLORIDA  COUNTY OF LASCO	th disabilities (see instructions on MILL-AN-O  (81) 926-678  Telephone Number  (AND O CALLS  City	State  State  Gnature of Notary I	Email Address  ZIP Code  Public
Signature of Candidate  39 LG DOKE FIRTH ST  Address	th disabilities (see instructions on MILL-AN-O  (81) 926-678  Telephone Number  (AN) 0 (AKCS)  City  Signer or and the second of	State  State  gnature of Notary I int, Type, or Stamp Comm	Email Address  ZIP Code  Public  nissioned Name of Notary Public below:
Signature of Candidate  39 26 00 26 FIRTH ST  Address  STATE OF FLORIDA  COUNTY OF LASON  Sworn to (or affirmed) and subscrib	Telephone Number  (AND O CARLES  City  Signature of the structions on the control of the control	State  State  gnature of Notary I int, Type, or Stamp Comm	Email Address  ZIP Code  Public  Public  Public Public Public below: