CANDIDATE OATH -	
NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate)	RECEIVED
write-in candidate:	FEB 1 2 2019
Write-in candidate	CITY OF NEW PORT RICHEY CITY MANAGER'S OFFICE
	OFFICE USE ONLY
Candidate Oath (Section 99.021(1)(a), Florida Statutes) (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 $MPR$ C	
	(Office) (District #)
, I am a qualified elector of	DASAD
(Circuit #) (Group or Seat #)	County, Florida,
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): 106371203 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 Man (7217-255 Signature of Candidate Telephone Number WILD FLOKIMANE NEWPORT Address City STATE OF FLORIDA COUNTY OF PASMO	9135 D. CHAPPER OUGRIZON. NET Email Address Reetfey A 34653 State ZIP Code Signature of Notory Public Print. Type, of Stamp Commissioned Name of Notary Public below.
Sworn to (or affirmed) and subscribed before me this 12th day of 1-Changen, 2019. rsonally Known or Produced Identification	JUDY MEYERS Commission # FF 949114 Expires April 28, 2020 Bonded Thru Tray Fain Insurance 500-385-7019
DS-DE 302NP (Rev. 11/17)	Rule 15-2 0001 F A C