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

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MINANT CONTEX

OFFICE USE ONLY

	Candidate C	the state of the s	
1 2001) > ((Section 99.021(1)(a), Flor	ida Statutes)	
I, DAVIDO, G			
hyphen, check box □. (See particularies). Although a write-in candidate's	h it to appear on the ballot. If you page 2 - Compound Last Names, name is not printed on the ballot,). No change can be made the name must be printed a	e after the end of qualifying.
am a candidate for the nonpartisar	office of OAK Creak	c00	
		(Office)	(District #)
(Circuit #)	; I am a qualified elector of	1500	County, Florida;
(Group or Geat #)	O differ the 192 hand and the P.		
am qualified under the Constitution	on and the Laws of Florida to hold	the office to which I desire	to be nominated or elected; I
ave qualified for no other public o	ffice in the state, the term of which	office or any part thereof r	uns concurrent with the office
seek; and I have resigned from a	any office from which I am required	d to resign pursuant to Sec	tion 99.012, Florida Statutes;
	of the United States and the Const		
	The state of the s		
allot as may be used by persons w	t: Print name phonetically on the ith disabilities (see instructions on p	page 2 of this form): [Not ap	plicable to write-in candidates
X J J J Ll Signature of Candidate	(\$13) 629-550 Telephone Number	2 StgerALD	5R D. 9MBIL 00)
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Address	city CHAP.	State	ZIP Code
Learning the County of the	MUN THE REPUBLICATION ST.	50	
STATE OF FLORIDA	Sig	nature of Notary Public	
COUNTY OF <u>Fasco</u>		nt, Type, or Stamp Commissioned	
Sworn to (or affirmed) and subscri	bed before me this 26		
day of May 20			······································
		Notary P	ublic State of Florida e A Alligood
Personally Known: or Produced Id	entification:	Tittanni	P A AIIIUUUU
	eriunoauoriV	My Com	mission GG 226701 10/05/2022