## 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:

2020 JUN -8 PM 1: 04

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Date City, Florida

	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 y hyphen, check box . (See page 2 - Compound Last Name Although a write-in candidate's name is not printed on the ballot.	es). No change can be made after the end of qualifying.
am a candidate for the nonpartisan office of	(Uffice) (District #)
(Circuit #) , Seat ( ; I am a qualified elector of	
I am qualified under the Constitution and the Laws of Florida to ho have qualified for no other public office in the state, the term of wh I seek; and I have resigned from any office from which I am requi and I will support the Constitution of the United States and the Con-	ich office or any part thereof runs concurrent with the office red to resign pursuant to Section 99.012, Florida Statutes;
Candidate's Florida Voter Registration Number (located on your v	oter information card): 106655905
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.]	
Signature of Candidate  Telephone Number  3201 Clover Blossom Circle Level 0 L.  Address  City	355 john ventophotmail.com Email Address alces FC 34638
STATE OF FLORIDA	State ZIP Code  Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me this 4 day of 500e, 20 ZO.  Personally Known: or Produced Identification:	ADA L MULLIX  Notary Public - State of Florida  Commission # GG 323204  My Comm. Expires Apr 14, 2023  Borded through National Notary Assn.
Type of Identification Produced:	