

**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**

**20 JUN 10 PM 4: 10**

**BRIAN E CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA**

**OFFICE USE ONLY**

**Candidate Oath**

(Section 99.021(1)(a), Florida Statutes)

I, **Robert Hideck**

*(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 CDD Longleaf, \_\_\_\_\_, \_\_\_\_\_  
(Office) (District #)

\_\_\_\_\_ , 4 ; I am a qualified elector of Pasco  County, Florida;  
(Circuit #) (Group or Seat #)

I am qualified under the Constitution and the Laws of Florida 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 which office or any part thereof runs concurrent with the office 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): 107349055

**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.]*

Robert Hi-deck

**X** [Signature] (727) 858-1151 robbhideck@gmail.com  
Signature of Candidate Telephone Number Email Address  
3340 Coontie Ct Trinity FL 34655  
Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF Pasco

[Signature]  
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  
 online presence this 10<sup>th</sup> day of June, 2020.

Personally Known: \_\_\_\_\_ or Produced Identification:

Type of Identification Produced: Driver's License

