

**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

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BRIAN E. CORLEY
SUPERVISOR OF ELECTIONS
DADE CITY, FLORIDA

OFFICE USE ONLY

Candidate Oath

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

I, **JIMMY ALLISON**

(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 **THE GROVES CDD**, NA,
(Office) (District #)

NA, 1; 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): **113349624JIM**

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.]

jim-ee al-uh-suhn

X Jimmy Allison
Signature of Candidate

(407) 492-6180

Telephone Number

jdaorl@yahoo.com

Email Address

8115 PONKAN RD

Address

LAND O LAKES

City

FLORIDA

State

34637

346337

ZIP Code

STATE OF FLORIDA

COUNTY OF Pasco

Loretta Kessler
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of

online notarization ☐ OR physical presence ☒

this 6th day of May, 20 22

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____



LORETTA KESSLER
Notary Public
State of Florida
Comm# HH209054
Expires 12/16/2025