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

2022 JUN 15 PM 12: 29

BRIAN E. CORLEY SUPERVISOR OF FLECTION OFFICE USE ONLY DADE CITY, FLORIDA

Candidate Oath

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(Section 99.021(1)(a), Florida Statutes)	
1, Caitin Chandler	· · · · · · · · · · · · · · · · · · ·
(Print name above as you wish it to appear on the ballot. If your last name consists	
hyphen, check box [] (see page 2 - Compound Last Names). No change can be Although a write-in candidate's name is not printed on the ballot, the name must be pr	
	med above for sain purposees,
am a candidate for the nonpartisan office of Wivegrass (Office)	,,
	(District #)
(Circuit #) , 5 ; 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 pursua	nt to Section 99.012, Florida Statutes;
and I will support the Constitution of the United States and the Constitution of the State of	f Florida.
1209112766	
Candidate's Florida Voter Registration Number (located on your voter information card): 12094275 \(\text{Q} \)	
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.]	
Rate-lyn chand-ir	
x COUM MM 13621-999-0586	Caitachandler@amain
Signature of Candidate Telephone Number	Cartechandler@gmail Email Address con
28408 Tranquil Lake Circle Welley Chapel FL	33543
28408 Tranquil Lake Circle Welley Chapel FL Address City State	ZIP Code
STATE OF FLORIDA	DLU
COUNTY OF Signature of Notary Print, Type, or Stamp County Of	nmissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence	Notary Public State of Florida
	Fiffannie A Alligood My Commission GG 226701
No not	Expires 10/05/2022
I Down U. K	expires 10/03/2022
Personally Known OR Produced Identification Type of Identification Produced: FL Driver License	explies to ozone