

RECEIVED

**LOYALTY OATH**  
**CANDIDATES WITH PARTY AFFILIATION**  
(Sections 876.05-876.10, Florida Statutes)

OFFICE USE ONLY  
06 JUL 17 PM 1:50

KURT L. GROWING  
SUPERVISOR OF ELECTIONS  
LAND O LAKES, FLORIDA

STATE OF FLORIDA

Pasco COUNTY

COUNTY

(PLEASE PRINT)

I,

Larry

Gilbert

DeLucenay

First Name

Middle Name/Initial

Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

**OATH OF CANDIDATE**

(Section 99.021, Florida Statutes)

I, Larry Gilbert DeLucenay

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT — NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of County Commissioner, 2, ,  
(office) (district) (circuit)

I am a qualified elector of Pasco County, Florida. I am qualified  
(group)

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.

**STATEMENT OF PARTY**

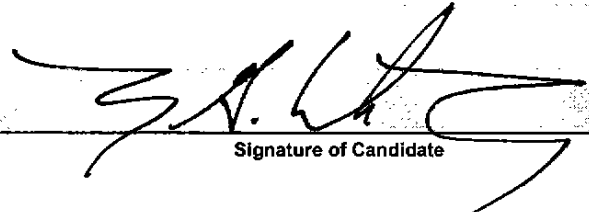
(Section 99.021, Florida Statutes)

I am a member of the Republican party. I am not a registered member of any other political party and have not been a candidate for nomination for any other political party for a period of 6 months preceding the general election for which I seek to qualify. I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH, OATH OF CANDIDATE AND STATEMENT OF PARTY AND THAT THE FACTS STATED IN EACH ARE TRUE.

**SIGN HERE**

**X**



Signature of Candidate

22923 Hale Road

Mailing Address

813 949 2167

Day Phone

813 949 2146

Fax Number

Land O Lakes

City

FL

State

34639

Zip Code

7/11/06

Date Signed