

**CANDIDATE OATH -  
STATE AND LOCAL PARTISAN OFFICE**

Check applicable one:

- Candidate with party affiliation
- Candidate with no party affiliation
- Write-in candidate

**RECEIVED**

**2020 JUN -8 PM 12:02**

**SUPERVISOR OF ELECTIONS  
ELECTION SERVICE CENTER**

**OFFICE USE ONLY**

**Candidate Oath**

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

I, Julie Marcus

*(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 office of Supervisor of Elections (Office) \_\_\_\_\_ (District #) \_\_\_\_\_ (Circuit #) \_\_\_\_\_

\_\_\_\_\_ ; my legal residence is Pinellas County, Florida; I am a qualified elector (Group or Seat #)

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.

**Statement of Party**

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

*(Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)*

I am a member of the Republican Party; I have not been a registered member of any other political party for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 107075643

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.]*

Julie Marcus

**X** [Signature] (727) 201-5456 info@electjuliemarcus.com  
 Signature of Candidate Telephone Number Email Address  
 9800 4th St. N., Suite 200 St. Petersburg Florida 33702  
 Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF Pinellas

[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 26 day of May, 2020.

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

Type of Identification Produced: \_\_\_\_\_

