## CANDIDATE OATH SCHOOL BOARD NONPARTISAN OFFICE

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

## RECEIVED

2022 JUN 13 PM 12: 04

SUPERVISOR L. L. LOCIONS ELECTION SERVICE CENTER

	ELECTION SERVICE CENTER	OFFICE USE ONLY
Candidate Oath  . (Section 99.021(1)(a) and 105.031, Florida Statutes)  (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 Pinulas	School Board (Office)	(District #)
; I am a qualified elector of (Circuit #) (Group or Seat #)	D' .	County, Florida;
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.		
Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the school board and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.		
Candidate's Florida Voter Registration Number (located on your voter information card): 110914407		
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.]  STEH-FUH-KNEE MEI-YUR		
X Signature of Candidate  Telephone Number  City	Email Addres	ZIP Code
STATE OF FLORIDA  COUNTY OF Pinellas	Signature of Notary Public Print, Type, or Stamp Commissioned Name of No	tary Public below:
Sworn to (or affirmed) and subscribed before me by means of online notarization \( \begin{align*} OR & \text{physical presence} \end{align*} \) this \( \begin{align*} 3 & \text{day of} & \end{align*} \) Personally Known \( \begin{align*} OR & \text{Produced Identification} \end{align*} \)	WENDY GRIMES  Notary Public - State of Florida  Commission # GG 279988  My Comm. Expires Jan 26, 2023  Bonded through National Notary Assn.	

Type of Identification Produced: FL DI