## CANDIDATE OATH STATE AND LOCAL PARTISAN OFFICE WITH PARTY AFFILIATION

DS-DE 301A (Eff. 10/2023)

## RECEIVED

2024 JUN 10 PM 12: 02

SUPERVISOR OF ELECTIONS FFICE USE ONLY

Candidate Oath		
Name to appear on ballot: Mike Twitty		
Check box if two last names without hyphen. (Name cannot be changed after qualifying.)		
Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)		
I swear or affirm that I am a candidate for the office of Property Appraiser		
(Office) (District #)		
; I am a qualified elector of Pinellas County (Group or Seat #)		County, Florida;
I am a qualified elector 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		
I swear or affirm that I am a member of the Party, for which I am seeking nomination as a candidate, for 365 c which I seek to qualify; and I have paid the assessment levied against.	days before the beginning of qualifying prec	ered member of this political eding the general election for e of the above-stated political
Statement of Outstanding Fines, Fees, or Penalties		
I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).  YES, I Do NO, I Do NotX  If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.		
y // (727)201-5	446 info@mik	xetwitty.com
Signature of Candidate  Telephone Numb		ail Address
4123 Harbor Hills Dr Largo		33770
Address of Legal Residence City  STATE OF FLORIDA	State	ZIP Code
COUNTY OF Pinellas	Signature of Notary Public Print, Type, or Stamp Commissioned N	lame of Notary Public below:
Swom to (or affirmed) and subscribed before me by means of		
online notarization OR physical presence this 4 day of OR Produced Identification	SARAH RATHKE Commission # HH 40 Expires May 31, 2027	
Type of Identification Produced: FL DL		
		Rule 1S-2.0001, F.A.C.

Phonetic Spelling of Name		
Phonetic spelling for the audio ballot ( wish it to be pronounced on the audio ba Mike Twitty	not required for qualifying purposes): Print the name phonetically on the line below as you lot as may be used by persons with disabilities (see instructions on page 3 of this form):	
	SUPERVISOR OF ELECTIONS	
Stateme	ent of Outstanding Fines, Fees or Penalties	
Pursuant to Section 99.021(1)(d), F.S., candidate, shall, at the time of subscribin or penalties that cumulatively exceed \$25	each candidate, whether a party candidate, a candidate with no party affiliation, or a write-ing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, of for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers 12, any local ethics ordinance governing standards of conduct and disclosure requirements, or	
Amount	Entity	
N/A	N/A	
Affidavit of Nickname (Only required if using nickname for the ballot.)		
My legal name is Michael affidavit are true and correct.	Twiffy I am over the age of eighteen (18) and the contents of this	
My nickname is of my legal name. I have not created the a political slogan or otherwise associate	I am generally known by this nickname or have used it as part e nickname to mislead voters. My nickname does not imply I am some other person, constitute me with a cause or issue, or that is obscene or profane.	
Signature of Candidate :	Title (y)	
STATE OF FLORIDA	La la Cattar	
COUNTY OF Pinelles	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:	
Sworn to (or affirmed) and subscribed be	efore me by means	
this 4th day of June	CAPACE TO A TO	
Personally Known OR Produced Identification SARAH RATHKE  Commission # HH 404804		
Type of Identification Produced:	Expires May 31, 2027	

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Rule 1S-2.0001, F.A.C.