## **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
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## RECEIVED

2024 JUN 10 PM 12: 28

SUPERVISOR OF ELECTIONS ELECTION SERVICE. CENTERFICE USE ONLY

On adjulate Onth		
Candidate Oath		
Name to appear on ballot: Lou SvELLING		
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 nonpartisan office of NE   AS SWCOAST FIRE Y SESUE DISTRICT, (Office) (District #)  (Circuit #) (Group or Seat #)  (Circuit #) (Group or Seat #)		
(Office) (District #)		
; I am a qualified elector of		
(Circuit #) (Group or Seat #)		
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.		
Control of the Contro		
Statement of Outstanding Fines, Fees, or Penalties		
l 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 Not		
If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.		
$O_{\alpha}O_{\alpha}$		
How K Snowling 127 24 2118 Cusnelling 4@GMAIL. Com		
Signature of Candidate  Telephone Number  Email Address		
Address of Legal Residence City State ZIP Code		
STATE OF FLORIDA		
COUNTY OF PINELIAS  Signature of Notary Public		
Print, Type, or Stamp Commissioned 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  Notary Public State of Florida  Kimberly Hampton		
Personally Known OR Produced Identification My Commission HH 493024 Expires 2/14/2028		
Type of Identification Produced:		
DS-DE 302NP (Eff. 10/2023) Rule 1S-2.0001, F.A.C.		

Phonetic Spelling of Name		
Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):		
Statement of Outstanding Fines, Fees or Penalties		
Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.		
Amount	Entity	
N. A	NA	
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	THE RESERVE TO SERVE THE RESERVE	
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	2507	
Affidavit of Nickname (Only required if using nickname for the ballot.)		
My legal name is Louis Roulling Tr I am over the age of eighteen (18) and the contents of this affidavit are true and correct.		
My nickname is 10 4 Sufficient I am generally known by this nickname or have used it as part		
of my legal name. I have not created the	e nickname to mislead voters. My nickname does not imply I am some other person, constitute	
a political slogan or otherwise associate	me with a cause or issue, or that is obscene or profane.	
Signature of Candidate Joins Shaling &		
STATE OF FLORIDA	() / NETTO A	
country of <u>Pinellas</u>	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:	
Sworn to (or affirmed) and subscribed be		
6th Time	sical presence SARAH RATHKE  , 2024  Commission # HH 404804	
44)	ed Identification Expires May 31, 2027	
Type of Identification Produced:	Z DL PRE-QUALIFIED	
	(0/5/24 mg)	
DS-DE 302NP (Eff. 10/2023)	Rule 1S-2.0001, F.A.C.	