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

SUPERVISOR OF ELECTIONS SARASOTA COUNTY FLORIDA

2022 JUN 13 PM 12: 06

FILED FOR RECORD OFFICE USE ONLY

Candidate Oath
(Section 99.021(1)(a), 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.)
am a candidate for the office of Charler Review Board, 1 (District #) (Circuit #)
(Group or Seat #); my legal residence is 1563 ACCADIA AVENUE 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 (Section 99.021(1)(b), Florida Statutes)
I am a member of the RUPUBLICAN Party; I have been a registered member of this political party, for
which I am seeking nomination as a candidate, 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, by the executive committee of the above-
stated political party.
Candidate's Florida Voter Registration Number (located on your voter information card): <u>」のの 1 子子 Ø め</u>
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):
uhl-yik-sAthn-druh KOH
YDD - 0- 0- 1941 7803442 -0014-
Signature of Candidate  Telephone Number  Email Address
Signature of Candidate Telephone Number Email Address  1563 Arcadia Avenue, SARASOTA FL 34232
Address City State ZIP Code
STATE OF FLORIDA
COUNTY OF CARAGO AND
COUNTY OF 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
Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:  CATHERINE R. FOWLER
Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence on this 3 RD day of JUNE, 20 22 Commission # GG 273851  Expires January 14, 2023  Bodded The Tow Eth Increase # GB 285 1486
Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence Catherine R Fowler Commission & GG 273851