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

SUPERVISOR OF ELECTIONS SARASOTA COUNTY FLORIDA

2022 JUN 17 AM 11: 11

FILED FOR RECORD SARASOTA COUNTY

OFFICE USE ONLY

Candidata Oath
Candidate Oath  (Section 99.021(1)(a), Florida Statutes)
1. Andre S. Hoefer
(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 Sorasofa Hemorial Hospital Board, North.  2 ; my legal residence is Sorasofa, Tl. 34340. County, Florida; I am a qualified elector
(Office) (District #) (Circuit #)
2 my legal residence is $e^{-1}$ $e^{-1$
(Group or Seat #) my legal residence is Servesofa, Fl. 34340 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)
Cooking 33.021(1)(b), Plotted Statutes)
I am a member of the Republican 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): 100359488
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):
HOE - FER
1106-111
V hi' / N/h 1000 212 25-15 1 1/07-5-21320 1/2/2000
X. M. S. M. 1941) 812.3575 A-HOEFER 132@ yahoo.co
Signature of Candidate Telephone Number / Email Address
Signature of Candidate  Telephone Number  Email Address  1971 Be Air Star PKWY Sarasota, +1. 34240.
Signature of Candidate Telephone Number / Email Address
Signature of Candidate  Telephone Number  Email Address  1971 Be Air Star PKwy Sarasota, +1. 34240.  Address  City  State  ZIP Code
Signature of Candidate  Telephone Number  Final Address  1971 Be Air Star PKWY Sarasota, +1. 34240.  Address  City State ZIP Code
Signature of Candidate  Telephone Number  Final Address  1971 Be Air Star PKwy Sarasota, +1. 34240.  Address  STATE OF FLORIDA  COUNTY OF Alason
Signature of Andress  1971 Be Air Star PKwy Sarasota, +1. 34240.  Address City State ZiP Code  STATE OF FLORIDA  COUNTY OF MARASOTA  Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
Signature of Fandidate  Telephone Number  Final Address  1971 Be Air Star PKwy Sarasota, +1. 34240.  Address  State ZiP Code  STATE OF FLORIDA  COUNTY OF MLASOTA  Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below:
Signature of Candidate  Telephone Number  Final Address  1971 Be Air Star PKwy Sarasota + 34240.  Address  City  State  ZIP Code  State  Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below:  online notarization  OR physical presence
Signature of Candidate  Telephone Number  Telephone Number  Telephone Number  Email Address  1971 Be Air Star PKWY Sarasota + 34240.  Address  City State ZIP Code  STATE OF FLORIDA  COUNTY OF
Signature of andidate  Telephone Number  Semail Address  1971 Be Air Star PKwy Sarasota + 34240.  Address  City  State  ZIP Code  State  Signature of Notary Public  Print, Type, or Stamp Commissioned Name of Notary Public below:  online notarization  OR physical presence