## 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:

SUPERVISOR OF ELECTIONS

2020 JUN -8 PM 2: 52

ST JOHNS COUNTY VICKY OAKES

☐ Write-in candidate	OFFICE U	ISE ONLY
	ate Oath (a), Florida Statutes)	
(Print name above as you wish it to appear on the ballot. hyphen, check box	Names). No change can be made after the end of queballot, the name must be printed above for oath purpose  Authority  (Office)  (District	valifying. s.) ,
I am qualified under the Constitution and the Laws of Florida thave qualified for no other public office in the state, the term of I seek; and I have resigned from any office from which I am read I will support the Constitution of the United States and the	of which office or any part thereof runs concurrent with the required to resign pursuant to Section 99.012, Florida S	ne office
Candidate's Florida Voter Registration Number (located on yo	our voter information card): 108007189	
Phonetic spelling for audio ballot: Print name phonetically or ballot as may be used by persons with disabilities (see instruction		
Signature of Candidate SIN EAGLE POINT DR.  Address  City  STATE OF FLORIDA  COUNTY OF		