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:

☐ \A/rito in

SUPERVISOR OF ELECTIONS

2022 JUN 13 PM 3: 38

ST JOHNS COUNTY

vvrite-in candidate	VICKY OAKES	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. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)		
am a candidate for the nonpartisan office of <u></u> <u></u> <u> </u>	(Office)	(District #)
(Circuit #), (Group or Seat #); I am a qualified elector of	St. Johns County	County, Florida;
I am qualified under the Constitution and the Laws of Florida have 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 and I will support the Constitution of the United States and the	f which office or any part thereof runs or required to resign pursuant to Section 9	concurrent with the office
Candidate's Florida Voter Registration Number (located on your voter information card): 1/5933500		
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): [Not applicable to write-in candidates.]		
X & C Proposed (904) 347- Signature of Candidate Telephone Number 189 & Lasa Szvilla Auc. St. Augusti. Address City	1305 1:21200 bor Email A	
STATE OF FLORIDA COUNTY OF St. Johns	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 \(\sum OR \) physical presence \(\begin{align*} \text{this \subscribed} \) day of \(\begin{align*} \text{Turk} \) Personally Known \(\sum OR \) Produced Identification \(\begin{align*} \text{Type of Identification Produced: \(\begin{align*} \begin{align*} \text{FL DL} \\ \text{DL} \end{align*}	DESIREE BAKER Notary Public, State of Flo My Comm. Expires 09/06/2 Commission No. HH1724	025