## 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

SUPERVISOR OF ELECTIONS

2022 JUN 15 PM 12: 45

ST JOHNS COUNTY VICKY OAKES

Write-in candidate	VIORY WARES	OFFICE USE ONLY
Candidate Oath  (Section 99.021(1)(a), Florida Statutes)  I, Warn L. MCWairn		
(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 World Co	mmerce CDD	,, (District #)
$\frac{1}{3}$ ; I am a qualified elector of $\frac{1}{3}$ (Group or Seat #)	SJ. Johns County	County, Florida;
I am qualified 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.		
Candidate's Florida Voter Registration Number (located on your voter information card): 122637512		
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.]		
Victoria Hall no	9150	- 1 000-
x KnewM9Vavu Hof, 376-8153 nenemcnairn@gmail.com		
Signature of Candidate Telephone Number 553 Casa Scrilla Ave St. August	ine FL 32092	ess
Address City	State 62092	ZIP Code
	<b>1</b>	2 3333
STATE OF FLORIDA		
COUNTY OF St. Johns	<b>Signature of Notary Public</b> Print, Type, or Stamp Commissioned Name of N	lotary Public below:
Sworn to (or affirmed) and subscribed before me by means of	,	
online notarization OR physical presence	DESIREE BAKER Notary Public, State of Florida My Comm. Expires 09/06/2025 Commission No. HH172485	
this 15 day of June , 2022.		
Personally Known  OR Produced Identification  FI 01		
Type of Identification Produced: FL 0L		