CANDIDATE OATH	
NONPARTISAN OFFICE	
(Do not use this form if a Judicial or School Board Candidate) Check box <b>only</b> if you are seeking to qualify as a write-in	2027 JUN 10 PH 12: C9
candidate:	
Write-in candidate	AT LOUDE CONCE
Candidate Oath	
Name to appear on ballot: Nicholas G. Binder	
Check box if two last names without hyphen. (Name cannot be changed after qualifying.)	
Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)	
I swear or affirm that I am a candidate for the nonpartisan office of <u>St. Augustive</u> Port Water way, Beach, (District #)	
Circuit #) (Group or Seat #)	or of County, Florida
(Circuit #) (Group or Seat #)	
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 Outstanding Fines, Fees, or Penalties	
I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).	
YES, I Do NO, I Do Not	
f you do, you must also specify the amount owed and each entity that levied the same on the reverse side.	
$\frac{1}{1}$	
X Vulture J. Signature of Candidate Of 97 4 11 3 4 90 N der (d Comquil, Net)   Signature of Candidate Telephone Number Email Address	
X / Luth J. Sounder (904) 471-5498 MBINDER Compatition Number Signature of Candidate Telephone Number Email Address 232 Big MAGNOLIA Count SAINTAugustine Beach, FL. 3200 Address of Legal Residence City State ZIP Code	
Address of Legal Residence City ZIP Code	
STATE OF FLORIDA	
COUNTY OF <u>J. JONNS</u>	Signature of Notary Public
Sworn to (or affirmed) and subscribed before me by means of	
online notarization OR physical presence	
this 25 day of May	
Personally Known OR Produced Identification WY COMMISSION # HH 461162 EXPIRES: November 2, 2027	
Type of Identification Produced: FL DVINEV ICONSE	
DS-DE 302NP Eff. 10/2023)	
	Rule 1S-2.0001, F.A.C.