OF ELECTIONS **CANDIDATE OATH** NONPARTISAN OFFICE 2024 JUH 10 PM 12: 37 (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: ST JOHNS COUNTY Write-in candidate VICKY OAKER OFFICE USE ONLY **Candidate Oath** KICHARD (DICK Name to appear on ballot: 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 Sounhave CDD (Office) (Office) (Circuit #) (Group or Seat #) (District #) 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 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.). NO, I Do Not X YES, I Do If you do, you must also specify the amount owed and each entity that levied the same on the reverse side. DEETTER 172 CODE YAHOO. CON ST. AUGUSTINE 172 FREMONT Address of Legal Residence STATE OF FLORIDA COUNTY OF (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 OR physical presence day of **EMILY WARD** MY COMMISSION # HH 461162

DS-DE 302NP Eff. 10/2023)

Type of Identification Produced:

Personally Known | OR Produced Identification |

Rule 1S-2.0001, F.A.C.

EXPIRES: November 2, 2027

Phonetic Spelling of Name
Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):
Statement of Outstanding Fines, Fees or Penalties
Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.
Amount Entity
Affidavit of Nickname (Only required if using nickname for the ballot.)
My legal name is RICHARD L. FETTER I am over the age of eighteen (18) and the contents of this affidavit are true and correct.
My nickname is
Signature of Candidate: Kichow h
STATE OF FLORIDA
Signature of Notary Public Frint, Type, of Stamp Commissioned Name of Notary Public below:
Sworn to (or affirmed) and subscribed before me by means
this day of, 20
Personally Known OR Produced Identification ST Type of Identification Produced: FL DV NCYS LICENSC EMILY WARD MY COMMISSION # HH 461162 EXPIRES: November 2, 2027
DS-DE 302NP (Eff. 10/2023) Rule 1S-2.0001, F.A.C.

6/4/24 EW