CANDIDATE OATH -NONPARTISAN OFFICE

On 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:

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	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 (Office) (District #) (Circuit #) (Group or Seat #)				
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):				
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.]				
Jan 304 366 734-1375				
Signature of Candidate Telephone Nymber Delay FA 32724				
Address City	State ZIP Code /			
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 this				
day of, 20				
Personally Known: or Produced Identification:				
Type of Identification Produced:				