## CANDIDATE OATH SCHOOL BOARD OFFICE

Check box *only* if you are seeking to qualify as a write-in candidate:

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Write-in candidate	OFFICE USE ONLY
Candidate Oath	
Name to appear on ballot: Kn S Ta GOOCIN 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 office of	(Office), 2 (District #)
Lam a qualified elector of Volusion 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.	
<b>Section 876.05, Florida Statutes</b> (only applicable if elected and when term of office begins): I am a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and 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	
If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.	
Signature of Candidate Telephone Number October Address of Legal Residence City	tenstagoodnet 4 volusias chools  Stora Brach Fr 32/1 f  State  State  State  State  State  State  State  State
STATE OF FLORIDA  COUNTY OF VOIUSIO	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 this day of June, 20 4.	GINGER HADLEY Notary Public - State of Florida
Personally Known OR Produced Identification	Commission # HH 268490 My Comm. Expires May 26, 2026 Bonded through National Notary Assn.
Type of Identification Produced:	Solided till dugli national notelly Assil.
DS-DE 304SB (Eff. 10/2023)	Rule 1S-2.0001, F.A.C.