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:

DS-DE 302NP (Eff. 10/2023)

VOL SUP OF ELECTIONS MAY 29 '24 PM2:53

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

Write-in candidate	OFFICE USE ONL
Candidate Oath	
Name to appear on ballot: Troy Kent Check box if two last names without hy	phen. (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	Volusia County Council 4 (Office) (District #)
n/a , n/a ; I am a qualified elec	tor of Volusia County, Florid
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 If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.	
n you do, you must also specify the amount owed and each e	
X / (386)871-1	
130 Magnolia Drive Telephone Numb Ormond Be	
Address of Legal Residence City	State ZIP Code
STATE OF FLORIDA COUNTY OF \\(\hat{\infty}\) \(\lambda\) \(\lambda\)	Claraboth J. Jews
Sworn to (or affirmed) and subscribed before me by means of	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:
online notarization \(\begin{align*} OR \\ \text{physical presence} \\ \text{this } \begin{align*} \text{day of } \\ \text{Personally Known} \(\begin{align*} OR \\ \text{Produced Identification} \end{align*} \) Type of Identification Produced:	ELIZABETH L. LEWIS MY COMMISSION # HH 370467 EXPIRES: July 6, 2027