

# CANDIDATE OATH –

## Committeemen and Committeewomen

Check applicable one:

- Precinct Committeeman or Committeewoman
- District Committeeman or Committeewoman
- State Committeeman or Committeewoman

OFFICE USE ONLY

### Candidate Oath

(Sections 99.021(1)(a) and (2), Florida Statutes)

I, \_\_\_\_\_

(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.)

am a candidate for the office of  **Committeeman**  **Committeewoman**

**Precinct/District Number** \_\_\_\_\_ (Not applicable to State Committeemen and State Committeewomen),

I am a qualified elector of \_\_\_\_\_ County, Florida; I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; and I will support the Constitution of the United States and the Constitution of the State of Florida.

### Statement of Party

(Section 99.021(1)(b), Florida Statutes)

I am a member of the \_\_\_\_\_ Party; I have not been a registered member of any other political party for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, as a candidate for said office by the executive committee of the political party, of which I am a member.

**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.]*

**X**

( )

**Signature of Candidate**

Telephone Number

Email Address

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 by physical \_\_\_ or online \_\_\_  
presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Personally Known: \_\_\_\_\_ or Produced Identification: \_\_\_\_\_

Type of Identification Produced: \_\_\_\_\_