

<p>LOYALTY OATH FOR STATE COMMITTEEMEN AND COMMITTEEWOMEN (Sections 876.05 - 876.10, Florida Statutes)</p> <p>STATE OF FLORIDA</p> <p>_____, COUNTY</p>	<p>OFFICE USE ONLY</p>
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I, <input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
First Name	Middle Name/Initial	Last Name

a citizen of the State of Florida and of the United States of America, ...and a candidate for political party office... do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)

I, _____
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT - NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of State Committeeman Committeewoman.

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.

STATEMENT OF PARTY
(Section 99.021, Florida Statutes)

I am a member of the _____ party. I am not a registered member of any other political party and have not been a candidate for nomination for any other political party for a period of 6 months preceding the general election for which I seek to qualify. 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.

X _____ ()

Signature of Candidate	Daytime Telephone Number	Email Address
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Address	City	State	ZIP Code
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Sworn to (or affirmed) and subscribed before me this _____ day of _____, 200_____.

Personally Known: _____ or _____

Produced Identification: _____

Type of Identification Produced: _____

Signature of Notary Public – State of Florida
Print, Type or Stamp Commissioned Name of Notary Public