

# Qualifying to run for Precinct Committeeman/woman



1) Fill out the Department of State Loyalty Oath (Document Number: DS-DE 24C)

- First Attachment
- Also available at:

<http://election.dos.state.fl.us/forms/pdf/dsde24c.pdf>

2) Turn the Department of State Loyalty Oath into your County's Supervisor of Elections

*Note: To find your county's supervisor of elections address contact the Department of State, Division of Elections at: (850) 245-6270 or visit their Website:  
<http://election.dos.state.fl.us/county/index.shtml>*

**Must be turned in between June 16, 2008 and noon on June 20, 2008**

3) Fill out the RPOF Loyalty Oath

- Second Attachment

4) Turn in the RPOF Loyalty Oath to your local county REC Chairman

**All Documents must be turned in no later than noon on June 20, 2008**

Republican Party of Florida

**LOYALTY OATH  
FOR PRECINCT COMMITTEEMEN  
AND COMMITTEEWOMEN**

(Sections 876.05 - 876.10, Florida Statutes)

**OFFICE USE ONLY**

**STATE OF FLORIDA**

\_\_\_\_\_, **COUNTY**

I, 

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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 Precinct      Committeeman      Committeewoman \_\_\_\_\_  
Precinct Number

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**

**Address**

**City**

**State**

**ZIP Code**

**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

# Party Loyalty Oath



I, \_\_\_\_\_, hereby swear and affirm that during my term of office I will not actively, publicly, or financially support the election of any candidate other than the Republican candidate in a partisan unitary, general or special election, or a Registered Republican in non-partisan elections, other than Judicial races governed under Florida Statute 105, if there is a registered Republican running for the same office, unless the county executive committee has taken an affirmative vote to endorse one Republican over another per Rule 8(B). I further swear and affirm that I will not engage in activities or conduct that may be deemed by the Grievance Committee and affirmed by the RPOF Chairman as likely to injure the name of the Republican Party or interfere with the activities of the Republican Party.

COUNTY: \_\_\_\_\_

PRECINCT OR DISTRICT: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

WITNESSED BY: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

Republican Party of Florida