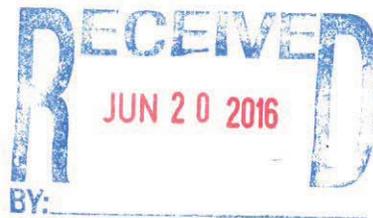


CANDIDATE OATH -
CANDIDATE WITH NO PARTY AFFILIATION



OFFICE USE ONLY

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, Tom Campenni
(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 with no party affiliation for the office of STUART CITY COMMISSION, _____
(office) (district #)
_____, _____; I am a qualified elector of MARTIN County, Florida;
(circuit #) (group or seat #)

I am qualified 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.

X [Signature] (772) 287-5781 THOMASFCAMPENNI@EMAIL.COM
Signature of Candidate Telephone Number Email Address

700 SW ST LUCIE CRES STUART FL 34994
Address City State Zip Code

Candidate's Florida Voter Registration Number (located on your voter information card): _____

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):

STATE OF FLORIDA

COUNTY OF Martin

Sworn to (or affirmed) and subscribed before me this 20th day of June, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

[Signature]
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CHERYL WHITE
MY COMMISSION # FF 967751
EXPIRES: April 6, 2020
Bonded Thru Budget Notary Services