

## CITY OF DORAL

## CANDIDATE AFFIRMATION AND OATH STATEMENT

My name is									
I am a citizen of the United States; I am at least 21 years of age; I am a bona fide									
resident and qualified elector (voter) of the City of Doral and have been a bona fide									
esident and qualified elector (voter) of the City of Doral for at least two (2) years prior									
o the beginning of the qualifying period for office.									
am a registered voter and a duly qualified elector of the City of Doral, Florida									
presently registered to vote in precinct No									
I presently reside at the following address (must include zip code):									
,									
which is my legal address, and I have resided continually at said address from the									
(day) of (month), (year) to the (day) of									
(month), (year).									
I have never been convicted of any crime in the State of Florida or any other state or									
jurisdiction, or have any other disqualification.									

I hereby make this statement under penalty of perjury.

Before						administer					
nroduce						to me: _					
sworn,							_	orianoanori,	wiio,	bomig	
•	•			e office of					:		
	<ul> <li>is a candidate for the office of;</li> <li>has resided in the City of Doral for the past two (2) years;</li> </ul>										
<ul> <li>is a qualified elector of Miami-Dade County, Florida;</li> </ul>											
	The state of the state of the control of the state of the										
	which he/she seeks election;										
• h	nas qu	alifie	d for no	other public	office	e in the state	, the teri	m of which	office	or any	
ŗ	art the	ereof	runs cor	ncurrent with	that	of the office	he/she	seeks;			
• h	• has resigned from any office from which he/she is required to resign pursuant to										
8	99.01	12 Flo	orida Sta	tutes;							
• ł	nas ne	ver b	een con	victed of any	/ crii	me in the Sta	ate of Fl	orida or an	y othe	r state	
C	or jurisdiction, or have any other disqualification;										
• ł	• has sworn to support the Constitution of the United States, the Constitution of the										
9	State o	f Flo	rida, and	the Charter	of th	ne City of Dor	al.				
	(Signature of Candidate)										
					(3)	griature or Ca	andidate	)			
					(Ca	andidate Prin	ted Nam	ne)			
Sworn t	to and	subs	cribed b	efore me this	<b>.</b>	day of _		,		at the	
City of I	Doral,	Mian	ni-Dade (	County, Flori	da.						
						Con	nie Diaz	z, MMC			
						City Cl	lerk, City	of Doral			