

This is the file of State and Precinct Committeeperson paperwork for the Republican Party filed with the Alachua County Supervisor of Elections office prior to the Noon deadline on June 24th, 2016.

Based on the current party rules, only the race for State Committeewoman, and the race for Precinct 46 Committeewoman will appear on the August 30th ballot.

CANDIDATE OATH -
STATE COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 8:53

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, DeLena C. MAY
(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 ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100448924

* 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):

DE I E NA MAY

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X DeLena C. May 352 316 0151 delenamaye@cox.net
Signature of Candidate Telephone Number Email Address

530 SW 21AV GAINESVILLE FL 32601
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016

Personally Known: g or

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

Produced Identification: _____

Type of Identification Produced:



CANDIDATE OATH -
STATE COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 8:53

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Sherrie V. McKnight

(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 Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 112574315

* 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):

Shar - e Mick Night

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X

(561) 301-9316

sherrie@mcknight.biz

Signature of Candidate

Telephone Number

Email Address

27831 NW 46th Avenue

Newberry

FL

32669

Address

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: X or

Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public

Produced Identification: _____

Type of Identification Produced: _____



ANN B STONE
MY COMMISSION #FF047300
EXPIRES September 16, 2017
FloridaNotaryService.com

**CANDIDATE OATH -
STATE COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 8:53

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, John Martin

(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 Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100436553

* 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):

(Jug) (Fo) (Hed) (Net) (Mat) (cat) (Red) (Fit) (Net)

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] (352) 222-3793 johnmartin@alachuacountyfla.com

Signature of Candidate

Telephone Number

Email Address

6713 S.E. 232 Ter Hawthorne FL 32640

Address

City

State

ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

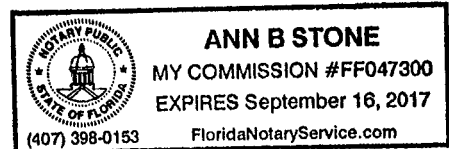
Sworn to (or affirmed) and subscribed before me this 20 day of JUNE, 2016

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

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



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Paul Gillespie
(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 01

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100473407

* 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):

Paul Gillespie

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

[Signature] 352 870-3834 pizzapaul@gmail.com
Signature of Candidate Telephone Number Email Address

20428 NE 135th Ave Waldo FL 32694
Address City State ZIP Code

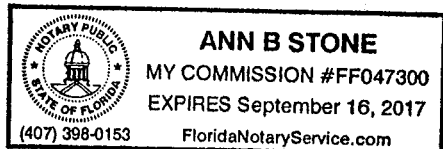
STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22 day of June, 2016.

Personally Known: _____ or [Signature]
Signature of Notary Public

Produced Identification: FL DL
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:
[Redacted]



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Bonnie Benefield
(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 2

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100476892

* 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):

Bonnie Benefield

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Ann B Benefield (352) 278 2571 bonnie.benefield@gmail.com
Signature of Candidate Telephone Number Email Address

2925 NW 177th Ave Gainesville FL 32609
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

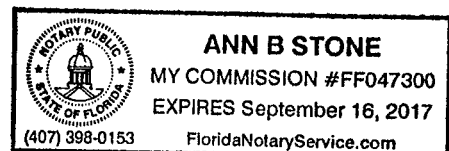
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Michael A Perry
(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 2

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 110979781

* 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):

Michael Perry

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X [Signature] 352 283-809 gmv.mike@gmail.com
Signature of Candidate Telephone Number Email Address
23157 NW 150TH BUCKNER FL 32622
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

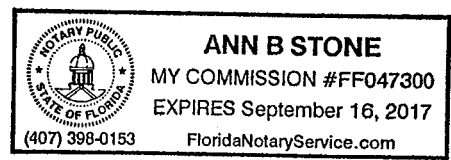
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 20 16.

Personally Known: [Signature] or

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

Produced Identification: _____

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, ANN BRAY STONE
(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 4

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100485943

* 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):
ANN B STONE

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Ann B Stone ³⁵² 281-1705 ANN@FLSTONES.COM
Signature of Candidate Telephone Number Email Address

3223 SW 298TH ST NEWBERRY FL 32669
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 15 day of June, 2016.

Personally Known: or _____
Signature of Notary Public Susan D Moss

Produced Identification: _____
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, BILL M STONE
(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 4

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100485944

* 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):

BILL M STONE

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

[Signature] 352 283-6949 BILL@FLSTONES.COM
Signature of Candidate Telephone Number Email Address

3223 SW 298TH ST NEWBERRY FL 32669
Address City State ZIP Code

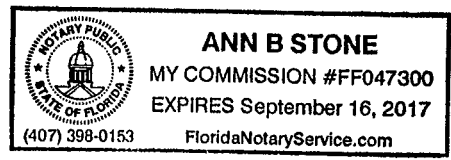
STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 15 day of JUNE, 2016
Personally Known: Y or [Signature]
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, WALT BOYER
(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 4

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 103649583

* 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):

WALT BOYER

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

WBoyer 1904-465 0556 WBOYER64@YAHOO.COM
Signature of Candidate Telephone Number Email Address

28702 SW 46th AVE NEWBERRY FL 32669
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

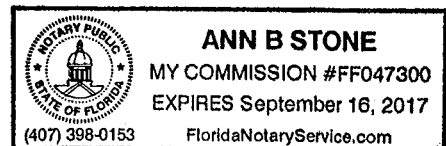
Sworn to (or affirmed) and subscribed before me this 16 day of JUNE, 2016

Personally Known: _____ or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Sherrie V. McKnight

(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 06

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 112574315

* 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):

Sherrie Mac Night

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X

Signature of Candidate

561-301-9316

Telephone Number

sherrie@mcknight.biz

Email Address

27831 NW 46th Avenue

Address

Newberry

City

FL

State

32669

ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

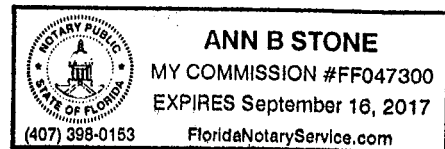
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: X or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:38
OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Anthony M. McKnight

(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 06

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100436209

* 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):

Anthony Mc Knight

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X

[Signature]
Signature of Candidate

(352) 682 - 4872
Telephone Number

tony@mcknight.biz
Email Address

27831 NW 46th Avenue
Address

Newberry
City

FL
State

32669
ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

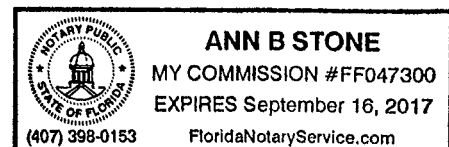
Personally Known: [Signature] or

[Signature]
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, John Martin

(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 8

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100436553

* 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):

John (jug) (fo) (HEED) (MET) (Mat) (cat) (Recl) (Ten) (FIT) (NET)

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] (352) 222-3793 johnmartin4alachua@gmail.com
Signature of Candidate Telephone Number Email Address

6713 S.E. 232 Ter Hawthorne FL 32640
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

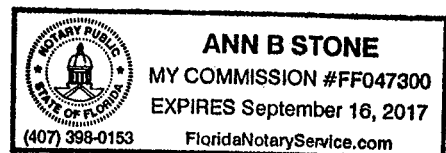
Sworn to (or affirmed) and subscribed before me this 20 day of JUNE, 2016.

Personally Known: [Signature] or

Produced Identification: _____

Type of Identification Produced: _____

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



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Cheryl A Roberts

(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 10

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100435288

* 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):

C H E R Y L R O B E R T S

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Cheryl A. Roberts (352) 234-0069 phil3twelve@bellsouth.net
Signature of Candidate Telephone Number Email Address

551 NW Seminary Ave Micanopy FL 32667
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 2016.

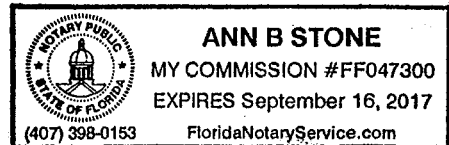
Personally Known: _____ or _____

Produced Identification: FL DL

Type of Identification Produced:



Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Juanita Glenn Nancarrow

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 16

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100392269

* 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):

Wah-NEE-tuh Glen Nancarrow

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Juanita B Nancarrow 352 466 0450 nancage@
Signature of Candidate Telephone Number Email Address bellsouth.net

351 SE 138 Av Micanopy FL 32667
Address City State ZIP Code

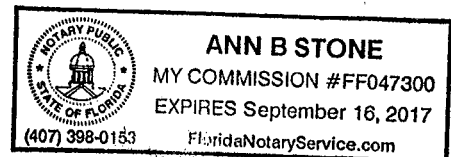
STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of June, 2016
Personally Known: ✓ or Ann B Stone

Produced Identification: _____

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

Type of Identification Produced: _____



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Michael D. Roberts
(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 10

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100398796

* 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):

MICHAEL ROBERTS

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Michael D Robert (321) 234-0066 YUCON@bellsouth.net
Signature of Candidate Telephone Number Email Address

SSI NW Seminary Ave, Micavay FL 32067
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 2016.

Personally Known: _____ or

Produced Identification: FL DL

Type of Identification Produced:



Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Jamie C Hill
(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 11

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100469373

* 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):

Jay me Hill

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Jamie C Hill (352) 514-76024 mcljamie428@gmail.com
Signature of Candidate Telephone Number Email Address

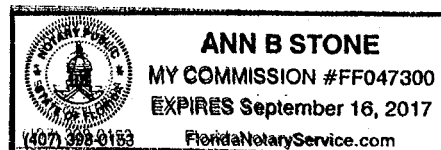
10405 S.W. 127 Terr Archer FL 32618
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of June, 2016.
Personally Known: [Signature] or Ann B Stone
Signature of Notary Public

Produced Identification: _____
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Cary D. Hill
(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 11

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100432239

* 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):

Cary D Hill

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Cary D. Hill 352-514-7624 mcljamic428@gmail.com
Signature of Candidate Telephone Number Email Address

10405 S.W. 127 Terr Archer FL 32618
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

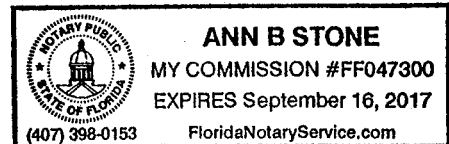
Sworn to (or affirmed) and subscribed before me this 23 day of June, 2016.

Personally Known: or or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, EUGENE LEOBESSETTE
(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 11

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100384275

* 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):

EUGENE LEO BESSETTE

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Eugene L. Besette (352) 494-6884 EBESSETTE2@GMAIL.COM
Signature of Candidate Telephone Number Email Address

13916 SW ARCHER ROAD ARCHER FL 32618
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of June, 2016.

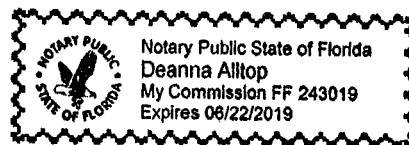
Personally Known: _____ or

Produced Identification: Driver license

Type of Identification Produced:

driver license

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



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Julie Waldman

(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 13

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100436751

* 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):

JOOLEE WAWLDMahn

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Julie Waldman (352) 338-7637 julie@juliewaldman.com
Signature of Candidate Telephone Number Email Address

1621 NE Waldo Rd Gainesville FL 32609
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23rd day of June, 2016.

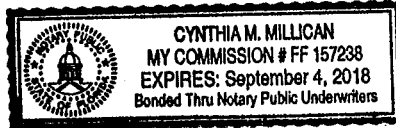
Personally Known: or

Cynthia M. Millican
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Jessica Hanson

(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 14

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 120108246

* 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):

jes-i-kuh han-suh n

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Jessica Hanson (352) 275 2171 jessica.hanson86@hotmail
Signature of Candidate Telephone Number Email Address

5111 NE 240 Terr Melrose FL 32666
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22 day of JUNE, 20 16

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced:

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



16 JUN 24 AM 11:48

CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, WALTER GRANT
(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 14

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100431109

* 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):

Walter Grant

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Walter Grant (352) 372-8661

Signature of Candidate

Telephone Number

Email Address

6017 W. Blvd Melrose FL 32666

Address

City

State

ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

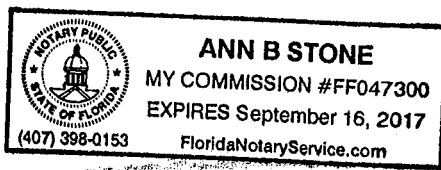
Sworn to (or affirmed) and subscribed before me this 24 day of JUNE, 2016

Personally Known: or

Produced Identification: _____

Type of Identification Produced:

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Maribel B. Lisk

(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 22 Alachua

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100407178

* 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):

Maribel Lisk

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Maribel B. Lisk (352) 870-7850 Lisk.MARI@gmail.com
Signature of Candidate Telephone Number Email Address

3816-B N-W-45th St. Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

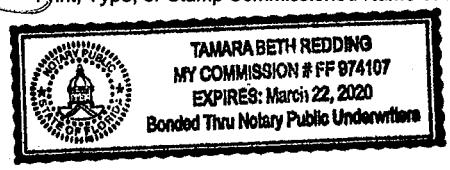
Sworn to (or affirmed) and subscribed before me this 22 day of June, 2016.

Personally Known: _____ or

Produced Identification: FPL

Type of Identification Produced:
[REDACTED]

Tamara Redding
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, MICHAEL LISK
(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 22-Alachua

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100406551

* 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):

Michael Lisk

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] (352) 870-7851 liskfree@hotmail.com
Signature of Candidate Telephone Number Email Address
3816 B NW 45th St. GAINESVILLE FL 32606
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22nd day of June, 2014.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

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



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Lisa Gail Lee
(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 22

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 103055467

* 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):

Le-sa Gail Le

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Lisa Gail Lee (352) 275-9134 lrosenba@aol.com
Signature of Candidate Telephone Number Email Address

3624 NW 51st St. Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

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

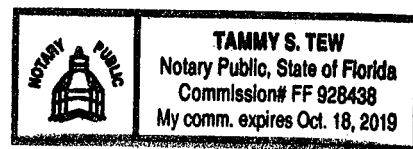
Personally Known: _____ or

Produced Identification: X

Type of Identification Produced:

Florida Drivers License

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



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, John Wilbur Holloway
(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 24

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100428178

* 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):

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

John Wilbur Holloway 352 359-5677 biko_surf53@hotmail.com
Signature of Candidate Telephone Number Email Address

1523NW 39th Dr Gainesville, FL 32605
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of June, 2016.

Personally Known: g or

Ann B Stone
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 11:54

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Anthony Sabatini
(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 24

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 122739480

* 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):
AN THU NEE SA BOH TEE NEE

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

AS (352)-455-2928 AFSABATINI@gmail.com
Signature of Candidate Telephone Number Email Address

4210 NW 14th Place Gainesville FL 32605
Address City State ZIP Code

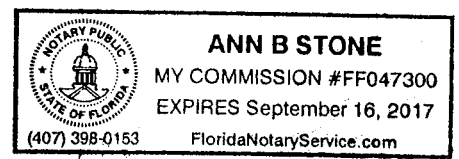
STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016
Personally Known: _____ or Ann B Stone
Signature of Notary Public

Produced Identification: FL DL

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:
[Redacted]



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, DARLENE PIFALO
(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 24

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100409869

* 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):

DARLENE PIFALO

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X [Signature] 377 1234 [Email Address]
Signature of Candidate Telephone Number Email Address
1035 NW 41 DR CAMBESSELLO FL 32605
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 20 16

Personally Known: [Signature] or [Signature]
Signature of Notary Public

Produced Identification: _____
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 10:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Maxim Dolinsky

(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 25

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 119 296 581

* 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):

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

[Signature] (352) 256-2047 maxim.dolinsky@gmail.com
Signature of Candidate Telephone Number Email Address

108 NW 7th St. unit A. Gainesville FL 32601
Address City State ZIP Code

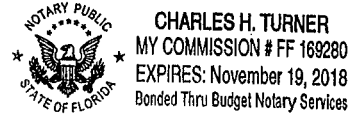
STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 24th day of June, 2016.

Personally Known: _____ or
Produced Identification: X

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

Type of Identification Produced:
EDN [Redacted]



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Daniel Rex Owen
(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 29

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 107266266

* 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):

Daniel Rex Owen

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] [Redacted] danielrexbowen@gmail.com
Signature of Candidate Telephone Number Email Address

REDACTED

Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21 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



SHELBY STEVENS
MY COMMISSION # FF 987406
EXPIRES: December 20, 2019
Bonded Thru Budget Notary Services

CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Mary K. Devlin
(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 30

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100405082

* 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):

Mary K. Devlin

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Mary K. Devlin (352) 219-4693 mdrn.bc@gmail.com
Signature of Candidate Telephone Number Email Address

404 NE 44th St. Gainesville FL 32641
Address City State ZIP Code

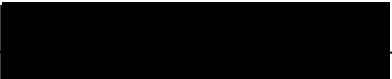
STATE OF FLORIDA
COUNTY OF Alachua


Sworn to (or affirmed) and subscribed before me this 22nd day of June, 2016.

Personally Known: _____ or

Produced Identification: X

Type of Identification Produced:

FLDL 


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



GERALD TANNER
MY COMMISSION # FF 900022
EXPIRES: July 15, 2019
Bonded Thru Budget Notary Services

**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Richard E. Devlin
(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 30

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100405057

* 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):

RICHARD E. DEVLIN

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X [Signature] 1352 375-7933 devlin6@cox.net
Signature of Candidate Telephone Number Email Address
404 N. E. 44th St GAINESVILLE FL 32641
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22nd day of June, 2016.

Personally Known: _____ or
Produced Identification: X
Type of Identification Produced:

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

FLDL [Redacted]



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 32

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 105895422

* 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):

Gina Delano

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Gina Delano (774) 480-1888 gsethmana@hotmail.com
Signature of Candidate Telephone Number Email Address

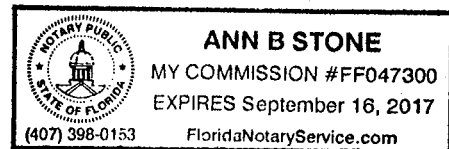
409 NW 48th Blvd Gainesville FL 32607
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 13 day of JUNE, 2016
Personally Known: X or _____
Signature of Notary Public Ann B Stone

Produced Identification: _____
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Anthony Delano
(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 32

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 121005255

* 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):

Anthony Delano

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Anthony Delano (972) 618-5801 capriboy1230@yahoo.com
Signature of Candidate Telephone Number Email Address

409 NW 48th Blvd Gainesville FL 32607
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016
Personally Known: [Signature] or Ann B Stone
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Matt Pesek
(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 32

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 117326558

* 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):

Mat Peh-sik

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Matt Pesek (321) 750-9572 matthew.pesek@gmail.com
Signature of Candidate Telephone Number Email Address

3461 SW 2nd Ave, 264 Gainesville FL 32607
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22 day of June, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

Lance Gardner
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Doris L. Perry
(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 32

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100393438

* 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):

Doris L. Perry

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Doris L. Perry (352) 331-1907 perrydo@gmail.com
Signature of Candidate Telephone Number Email Address

5771 NW 4th Pl. Gainesville, FL 32607
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

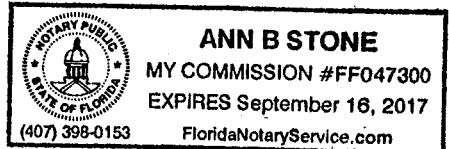
Sworn to (or affirmed) and subscribed before me this 20 day of JUNE, 2016

Personally Known: [initials] or

Produced Identification: _____

Type of Identification Produced:

Ann B. Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

1. Keith E. McInnis

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 33

I am a qualified elector of REPUBLICAN 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100440815

* 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):

KEITH McINNIS

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Keith E. McInnis
Signature of Candidate

354 240-6210
Telephone Number

KeithMcInnis@3mail.com
Email Address

2215 N R 15 Terr
Address City

Gainesville, FL
State

326009
ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

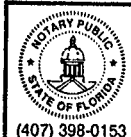
Personally Known: 4 or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public



ANN B STONE
MY COMMISSION #FF047300
EXPIRES September 16, 2017
FloridaNotaryService.com
(407) 398-0153

CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, ROSALYN MILLER
(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 35

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100563274

* 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):

ROSALYN MILLER

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Rosalyn Miller 352 692-4466 ROZ57@COX.NET
Signature of Candidate Telephone Number Email Address

6600 SW 13th ST GAINESVILLE FL 32608
Address City State ZIP Code

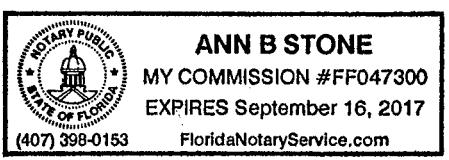
STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: [Signature] or Ann B Stone
Signature of Notary Public

Produced Identification: _____
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, DAVID S. DANVERS
(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 37

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100382830

* 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):

DAVID S DANVERS

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

[Signature] (352) 372-2895 BRODAVE13@YAHOO.COM
Signature of Candidate Telephone Number Email Address

41705 NW 36TH CT GAINESVILLE FL 32605
Address City State ZIP Code

STATE OF FLORIDA

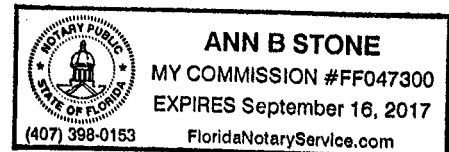
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.
Personally Known: [Signature] or [Signature]
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, DANIEL T. WHITE
(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 37

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100475374

* 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):

DANIEL T. WHITE

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

[Signature] (352) 494 3111 dtwhite@guille@gmail.com
Signature of Candidate Telephone Number Email Address

3810 NW 39 Ave Gainesville, FL 32606
Address Mailing City State ZIP Code
P.O. Box 357247 Gainesville, FL 32635

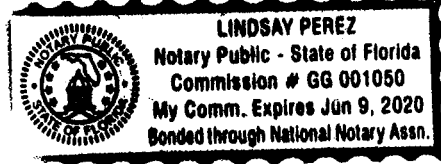
STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21 day of June, 2016.

Personally Known: _____ or
Produced Identification:

Type of Identification Produced:
FLDL [Redacted]

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



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Kaelyn Allen
(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 42

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 118660358

* 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):
Kay-lynn Allen

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Kaelyn Allen 352 1275-4371 Kaelynallen11@gmail.com
Signature of Candidate Telephone Number Email Address

3927 SW 86th St Gainesville FL 32608
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 20 16.

Personally Known: or

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

Produced Identification: _____

Type of Identification Produced:



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Rose Weiner
(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 42

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100399398

* 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):

Rose Weiner

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Rose Weiner 904 970-9915 WeinerMedia@gmail.com
Signature of Candidate Telephone Number Email Address
8015W 13 Plac Gainesville FL 32608
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

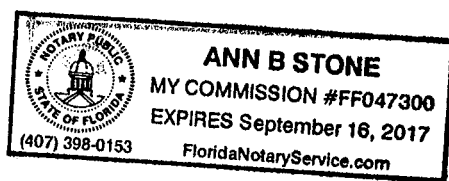
Sworn to (or affirmed) and subscribed before me this 19 day of JUNE, 2016

Personally Known: or

Produced Identification: _____

Type of Identification Produced:

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Thomas F. Hayes-Morrison

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 43

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 10042 4154

* 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):

Thomas Hayes Morrison

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Thomas F. Hayes Morrison 352 246-2620 thomasfhus@yahoo.com
Signature of Candidate Telephone Number Email Address

228 S.W. 77th TER., Gainesville FL 32607
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

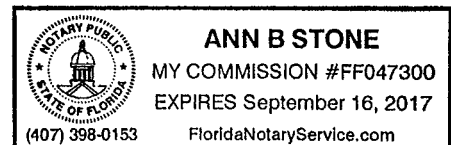
Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 2016.

Personally Known: X or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, JOHN G MENOWER
(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 44

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100525276

* 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):

JOHN G ME - NO - HER

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] ³⁵² () 331-0695 JD MENOWER @ SOUTH Bell
Signature of Candidate Telephone Number Email Address NET

2701 NW 103rd way GAINESVILLE FL 32606
Address City State ZIP Code

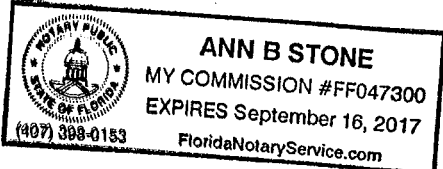
STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: _____ or
Produced Identification: FN DL

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

Type of Identification Produced:
[Redacted]



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Stephen Stafford Jones
(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 46

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.

Candidate's Florida Voter Registration Number (located on your voter information card): 120613515

* 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):

Steven Stafford Jones

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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

X [Signature] (352) 682-7405 Stephen.jones1996@gmail.com
Signature of Candidate Telephone Number Email Address

9485 NW 23rd Place Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

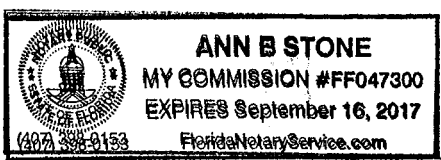
Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 2016.

Personally Known: ✓ or _____

Produced Identification: _____

Type of Identification Produced: _____

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



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Stafford Jones
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100417664

* 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):

Stafford Jones

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X

[Signature]

Signature of Candidate

(352) 256-9579

Telephone Number

SSONES@DATASYSTEMS-FL.COM

Email Address

9485 NW 23rd Place
Address

Gainesville
City

FL
State

32606
ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

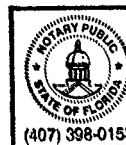
Personally Known: Y or

Produced Identification: _____

Type of Identification Produced: _____

[Signature]
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public



ANN B STONE
MY COMMISSION #FF047300
EXPIRES September 16, 2017
FloridaNotaryService.com

CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, John Stevens
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100459556

* 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):

JOHN STEVENS

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X John W. Stevens 352 333 1668 jwstevens@aol.com
Signature of Candidate Telephone Number Email Address

11115 NW 14th Avenue; Gainesville FL 32606
Address City State ZIP Code

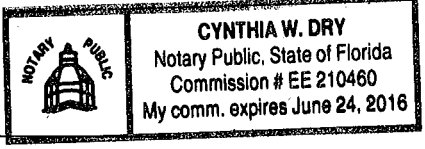
STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 21 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

CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Susan C. Williams

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 46

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100428040

* 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):

Susan Williams

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Susan C. Williams (352) 332-2872 bearhugs1923@cox.net
Signature of Candidate Telephone Number Email Address

814 N.W. 107th. Terrace Gainesville, Florida 32606
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016

Personally Known: OK or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Robbie Stevens
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100459768

* 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):

ROBBIE STEVENS

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Robbie Stevens 352 332 1668 jrstevens95@yahoo.com
Signature of Candidate Telephone Number Email Address
1115 NW 14th Avenue; Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF ALACHUA

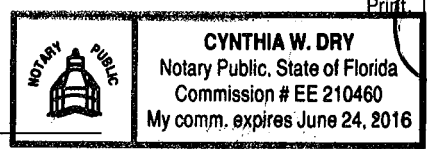
Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 2016

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

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



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Debbie Mencher
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100459534

* 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):

Mencher

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Debbie Mencher (352) 331.0695 debbiemae@gmail.com
Signature of Candidate Telephone Number Email Address

2701 NW 103 Way Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: _____ or

Produced Identification: FL DL

Type of Identification Produced:
[Redacted]

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Christie E. Jones
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100465800

* 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):

Christie Jones

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

→ **X** Christie E. Jones (352) 256-9579 cejones@datasystems-fl.com
Signature of Candidate Telephone Number Email Address

9485 NW 23rd Place Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of June, 2016.

Personally Known: [Signature] or
Signature of Notary Public

Produced Identification: _____
Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced: _____



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Jenna Blumer
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 122523508

* 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):

Jenna Bloomer

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Jenna Blumer (352) 682-7376 jennablumer@gmail.com
Signature of Candidate Telephone Number Email Address

9485 NW 23rd Place Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

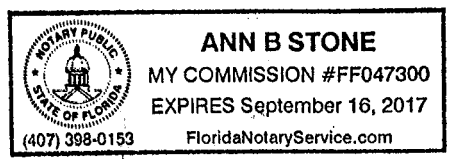
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Brittany Blumer
(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 46

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 121964934

* 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):

Brittany Bloomer

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X

Brittany Blumer
Signature of Candidate

(352) 219-7107
Telephone Number

brittanyblumer@gmail.com
Email Address

9485 NW 23rd Place
Address

Gainesville
City

FL
State

32606
ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of June, 20 16

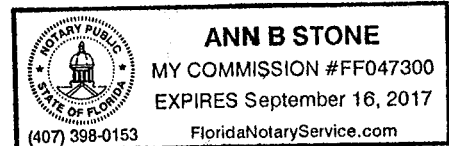
Personally Known: X or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Tammy Prince
(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 47

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100403447

* 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):

Tuh-am-mee P-

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Tammy Prince 352 215-3352 tprince2@me.com
Signature of Candidate Telephone Number Email Address

1522 SW 112th Street Gainesville FL 32607
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22nd day of June, 2016.

Personally Known: _____ or

Produced Identification: X

[Signature]
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:

FL DL



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Susan E. Baird
(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 47

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100474518

* 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):

Susan Baird

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Susan E. Baird (352) 316-3080 susanbaird@bosshardtrealty.com
Signature of Candidate Telephone Number Email Address

2946 SW 98th Way Gville FL 32608
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 20 16.

Personally Known: or

Ann B Stone
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Harold L. Wise

(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 48

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100472286

* 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):

Harold L Wise

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Harold L. Wise (352) 284 1442 rgoharrywise@yahoo.com
Signature of Candidate Telephone Number Email Address

4712 SW 67th Terr Gainesville FL 32608
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF ALACHUA

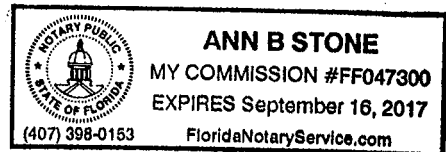
Sworn to (or affirmed) and subscribed before me this 16 day of JUNE 20 16

Personally Known: Y or

Produced Identification: _____

Type of Identification Produced: _____

Ann B. Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, TIM ROGERS
(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 49

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100394411

* 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):

Tim Rogers

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

Signature of Candidate (Signature) Telephone Number (352) 262-4856 Email Address TIM.ROGERSRPH@ALACHUA.COM
Address 2628 NW 16250 City NEWBERY State FL ZIP Code 32669

STATE OF FLORIDA

COUNTY OF Alachua

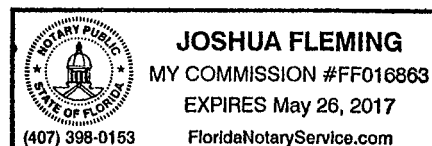
Sworn to (or affirmed) and subscribed before me this 21 day of June, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

(Signature)
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 49

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100414760

* 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):

Ron Thornton

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

J. Ronald Thornton (352) 472-6026 ron Thornton@cox.net
Signature of Candidate Telephone Number Email Address

17829 NW 20th Avenue, Newberry FL 32669
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22nd day of June 2016

Personally Known:

Produced Identification:

Type of Identification Produced:

FLDL

Jared D. Hart
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:38

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, E. Bernice Thornton
(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 49

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100384308

* 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):

Bernice Thornton

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

E. Bernice Thornton (352) 472-6026 ebthornton@cap.net
Signature of Candidate Telephone Number Email Address

17829 NW 20th Avenue Newberry FL 32669
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

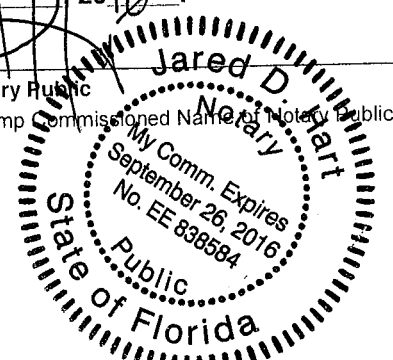
Sworn to (or affirmed) and subscribed before me this 22nd day of June, 2016

Personally Known: _____ or

Produced Identification:

Type of Identification Produced:
FLDL

Jared D. Hart
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 21 AM 10:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, LAURIE NEWSOM

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

I am a candidate for the office of Precinct Committeeman Committeewoman Precinct Number 50

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100392872

* 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):

LAR-EE NU-SUM

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Laurie Newsom (1 352 377 7733 / newsom@eyesurgicenter.com)

Signature of Candidate

Telephone Number

Email Address

1836 NW 30 Terr GAINESVILLE FL 32605

Address

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

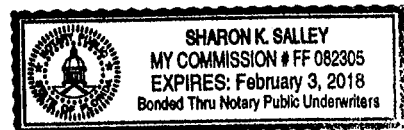
Sworn to (or affirmed) and subscribed before me this 14 day of June, 2016.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

Sharon K. Salley
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:40

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, John Hartnett
(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 52

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 106992699

* 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):

John Hart net

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] (772) 580-8130 johnhartnett75@gmail.com
Signature of Candidate Telephone Number Email Address

2625 SW 75th Street #119 Gainesville FL 32608
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

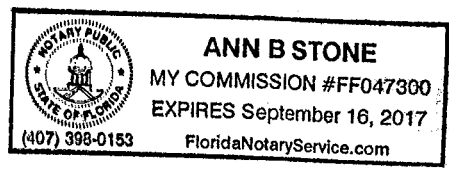
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

Personally Known: OK or

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

Produced Identification: _____

Type of Identification Produced:



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:34

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, DEBRA LYNN MCELROY
(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 53

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100403612

* 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):

Debra Lynn McElroy

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Debra Lynn McElroy 352-214-5229 debi.mcelroy@gmail.com
Signature of Candidate Telephone Number Email Address

16628 W. Co. Rd. 1491 ALACHUA FLORIDA 32615
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016
Personally Known: _____ or Ann B Stone
Signature of Notary Public

Produced Identification: FL DL

Type of Identification Produced:
[Redacted]

Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Winston Rushing
(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 53

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100474840

* 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)
Winston Rushing

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Winston Rushing (352) 318-1421 LWRUSHING@WINDSTREAM Not
Signature of Candidate Telephone Number Email Address

P.O. Box 1252 Alachua FL 32616
Address City State ZIP Code
13618-218 Lane N.W.

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23rd day of June, 20 16.

Personally Known: or

Lora T. Holt
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

Produced Identification: _____

Type of Identification Produced: _____



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

16 JUN 24 AM 9:40

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, H. Herbert Head

(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 56

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100389139

* 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):

H. Herbert Head

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X H. Herbert Head

Signature of Candidate

(352) 332-6430

Telephone Number

JBHHH@JUNO.COM

Email Address

11125 SW 3rd Avenue

Address

Gainesville

City

FL

State

32607-

ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

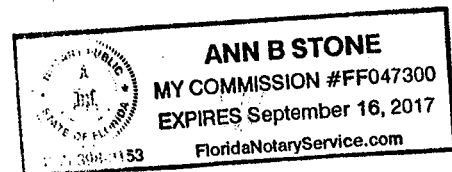
Sworn to (or affirmed) and subscribed before me this 16 day of JUNE, 2016.

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Janet B. Head

(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 56

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100389140

* 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):

Janet Head

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Janet B. Head 1352 332-6430 jbh@juno.com
Signature of Candidate Telephone Number Email Address

1125 S.W. 3rd Avenue Gainesville, FL 32607
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

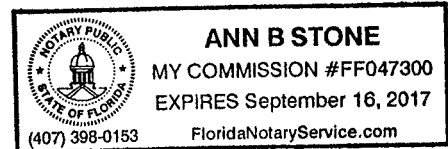
Sworn to (or affirmed) and subscribed before me this 16 day of JUNE, 20 16

Personally Known: X or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Caroline Boudreaux
(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 56

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 122848759

* 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):

Caroline Boudreaux

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

Caroline Boudreaux (407) 948-0936 carolineboudreaux@gmail.com
Signature of Candidate Telephone Number Email Address

11952 SW 3rd Ln Gainesville FL 32607
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

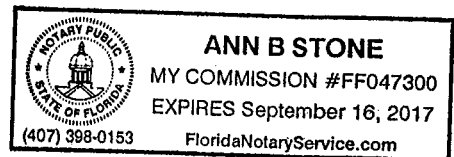
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016
Ann B Stone
Signature of Notary Public

Personally Known: _____ or

Produced Identification: FL DL

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:
[Redacted]



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Delena C MAY
(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 59

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100448924

* 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):

DE LE NA MAY

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

X Delena May 352 316 0151 delenamaye
Signature of Candidate Telephone Number Email Address

530 SW 21 AV Gainesville FL 32601
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016

Personally Known: X or

Produced Identification: _____

Type of Identification Produced:

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Alicia Hernandez

(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 59

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 117393475

* 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):

uh-IEE-sh-uh her-NAN-des

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Alicia Hernandez

Signature of Candidate

(352)215-5189

Telephone Number

alicia5189@yahoo.com

Email Address

1020 SW 11th Terrace

Address

Gainesville

City

Florida

State

32601

ZIP Code

STATE OF FLORIDA

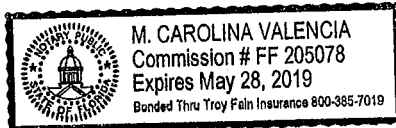
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 22 day of June 2016.

Personally Known: _____ or _____

Produced Identification: _____

Type of Identification Produced: _____



M. Carolina Valencia
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public

**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:35

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Mac McEachern

(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 59

I am a qualified elector of Alachua County 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100391952

* 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):

mac mac each ern

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Mac McEachern

(352) 376 2353

imac@cox.net

Signature of Candidate

Telephone Number

Email Address

1020 SW 11th Terrace

Gainesville

FL

32601

Address

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016.

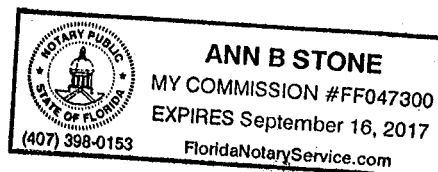
Personally Known: [Signature] or

Ann B Stone
Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public

Produced Identification: _____

Type of Identification Produced: _____



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, HERBERT L. COOKE
(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 60

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 160415123

* 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):

HERBERT L. COOKE

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REP 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.

X Herbert L. Cooke (386) 454-1470 HLDCooke@windstream.net
Signature of Candidate Telephone Number Email Address

24414 NW 94th Ave ALACHUA FL 32615
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

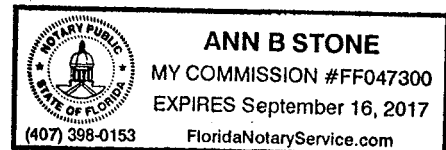
Sworn to (or affirmed) and subscribed before me this 21 day of JUNE, 2016.

Personally Known: Q or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Dennis L. Gestrin
(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 60

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100584580

* 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):

Deniss 'Gestrin

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

Dennis L Gestrin (352) 262 8753 dgest007@aol.com
Signature of Candidate Telephone Number Email Address

P.O. Box 594 High Springs FL 32655
Address City State ZIP Code

STATE OF FLORIDA Alachua
COUNTY OF

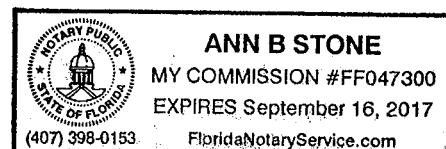
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE 20 16.

Personally Known: [Signature] or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 21 AM 10:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Roderick F. Gonzalez
(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 60

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 115008705

* 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):

Roderick F. Gonzalez

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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

X [Signature] 352 222-6433 roderickf@msn.com
Signature of Candidate Telephone Number Email Address

24514 NW 78 AVE Alachua FL 32615
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 14 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



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, BARBARA YOUNG MARTIN
(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 60

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100406571

* 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):

BARBARA YOUNG MARTIN

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

Barbara Young Martin (386) 454-7101 BMARTIN7101@ADG.COM
Signature of Candidate Telephone Number Email Address

24614 NW 86 PL, ALACHUA, FLORIDA 32615
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 15 day of JUNE, 2016.

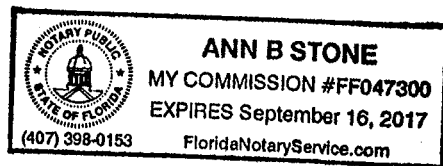
Personally Known: or

Ann B Stone
Signature of Notary Public

Produced Identification: _____

Print, Type, or Stamp Commissioned Name of Notary Public

Type of Identification Produced:



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Mildred Russell
(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 61

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100401788

* 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):

Mildred Russell

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the REPUBLICAN 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.

Mildred Russell (352) 745-7646 myrth460@gmail.com
Signature of Candidate Telephone Number Email Address

3531 NW 35 Place Gainesville FL 32605
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

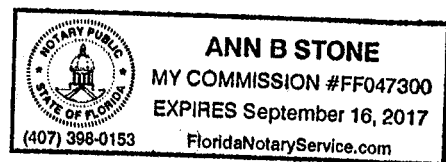
Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 20 16

Personally Known: [Signature] or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:37

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Kathleen Duagan Benton
(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 061

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100416266

* 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):

100416266 KATHLEEN BENTON

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Kathleen Duagan Benton (352) 258-3541 notneb.kathy@gmail.com
Signature of Candidate Telephone Number Email Address

3641 NW 23 Pl. Gainesville, FL 32605
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

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

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced:

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

'16 JUN 24 AM 9:39

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Mary M Boyle
(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 61

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100400672

* 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):

Mary Boyle

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Martha Boyle (352) 378-9635 mboyle356@gmail.com
Signature of Candidate Telephone Number Email Address

3561 NW 35th Pl Gville FL 32605
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

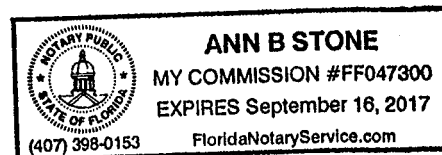
Sworn to (or affirmed) and subscribed before me this 20 day of JUNE, 2016

Personally Known: ✓ or

Produced Identification: _____

Type of Identification Produced: _____

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, HENRY E RUSSELL III
(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 61

I am a qualified elector of ALACHUA 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100407682

* 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):

HENRY E RUSSELL III

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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

X Henry E Russell III 352 745-7696 Rusty15praying@mac.com
Signature of Candidate Telephone Number Email Address

3531 NW 35th PLACE GAINESVILLE FLORIDA 32605
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF ALACHUA

Sworn to (or affirmed) and subscribed before me this 23 day of JUNE, 2016

Personally Known: 9 or

Produced Identification: _____

Type of Identification Produced:

Ann B Stone
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



16 JUN 24 AM 11:32

**CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN**

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, Robert Woody
(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 62

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100397848

* 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):

Robert Woody

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X [Signature] (352) 328-9472 rlwoody53@yahoo.com
Signature of Candidate Telephone Number Email Address

3737 NW 75th Street Gainesville FL 32606
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 24 day of June, 2016.

Personally Known: _____ or _____

Produced Identification: FL DL

Type of Identification Produced:

Florida Driver's license

Kathy V. Siegle
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public



CANDIDATE OATH -
PRECINCT COMMITTEEMEN AND
COMMITTEEWOMEN

'16 JUN 24 AM 9:36

OFFICE USE ONLY

OATH OF CANDIDATE (Section 99.021, Florida Statutes)

I, TANNA ROPER
(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 63

I am a qualified elector of Alachua 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 100424236

* 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):

TANNA ROPER

STATEMENT OF PARTY (Section 99.021, Florida Statutes)

I am a member of the Republican 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.

X Tanna Roper (386) 962-3489 _____
Signature of Candidate Telephone Number Email Address

11226 NW 61 Ave Alachua, FL 32615
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me this 21st day of June, 2016

Personally Known: _____ or

Produced Identification:

Type of Identification Produced:
FL DC

Hilda Ozoria
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public

