CANDIDATE OATH
STATE AND LOCAL PARTISAN OFFICE WITHOUT PARTY AFFILIATION

OFFICE USE ONLY

Name to appear on ballot: _____

☐ Check box if there are two last names without hyphen. (Name cannot be changed after qualifying.)

☐ Check box if name includes nickname. (To use nickname, you must complete the Affidavit of Nickname on page 2 of this form.)

I swear or affirm that I am a candidate for the office of _____ (*Office*), _____ (*District #*),

_____ (*Circuit #*), _____ (*Group or Seat #*); I am a qualified elector of _____ **County**, Florida;

I am a qualified elector under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

I swear or affirm, in addition to being a citizen of the United States, that: *(Check applicable box.)*

☐ **I am not** a citizen of another country. ☐ **I am** a citizen of another country, specifically _____.

Statement of No Party Affiliation: I am registered without any party affiliation and have not been a registered member of any political party for at least 365 consecutive days preceding the beginning of qualifying before the general election for which I seek to qualify.

Statement of Legal Name Change: I have not legally changed my name through a petition pursuant to s. 68.07, F.S., during the 365-day period preceding the beginning of qualifying. (This does not apply to any change of name in proceedings for dissolution of marriage or adoption of children or based on a change of name conducted with a marriage certificate.)

Statement of Outstanding Fines, Fees, or Penalties: *(Check applicable box. If you do owe more than $250, you must also specify the amount owed and each entity that levied the same on page 2 of this form.)*

☐ **I do not** / ☐ **I do** owe outstanding fines, fees, or penalties that cumulatively exceed $250, for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106. (s. 99.021(1)(d), F.S.)

( )

Signature of Candidate | Telephone Number | Email Address

Address of Legal Residence | City | State | ZIP Code

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of

☐ physical presence *OR* ☐ online notarization

this _____ day of _____, 20____.

☐ Personally Known *OR*

☐ Produced Identification: _____
(Type of ID Produced)

Signature of Officer Administering Oath
Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

DS-DE 301B (Eff. 07/2026) **Rule 1S-2.0001, F.A.C.**

DRAFT

Detailed Statement of Outstanding Fines, Fees, or Penalties

(Only required if you owe more than $250)

Amount	*Entity*

Affidavit of Nickname

(Only required if using nickname for the ballot)

My legal name is _____. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is _____. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of

☐ physical presence *OR* ☐ online notarization

this _____ day of _____, 20____.

☐ Personally Known *OR*

☐ Produced Identification: _____
(Type of ID Produced)

_____
Signature of Officer Administering Oath
Affix Seal Below or, if judge, provide name, title, and court (s. 92.50, F.S.)

Phonetic Spelling of Name

(Not required for qualifying)

Print the name phonetically on the line below as you wish your name to be pronounced on the audio ballot that may be used by persons with disabilities (see attached Guide for Phonetic Spelling).

_____

DRAFT

Guide for Printing Phonetic Spelling of Candidate's Name for Audio Ballot

(Do not submit this page to the filing officer)

1. Use the tables below for Phonetic Spelling of Candidate's Name on page 2 of Form.
2. Use upper case for "stressed" syllables. Use lowercase for "unstressed" syllables.
3. Use dashes (-) to separate syllables.
4. Add any notes such as rhyming examples, silent letters, etc.

Vowels			
Stressed Vowel Sounds		**Unstressed Vowel Sounds**	
EE	(FEET) f*ee*t	uh	(SO-fuh) sofa (FING-guhr) finger
I	(FIT) f*i*t		
E	(BED) b*e*d		
A	(KAT) c*a*t (KAD) c*a*d		
AH	(FAH-thur) f*a*ther (PAHR) p*a*r		
AH	(HAHT) h*o*t (TAH-dee) t*o*ddy		
UH	(FUHJ) f*u*dge (FLUHD) fl*oo*d		
UH	(CHUHRCH) ch*u*rch		
AW	(FAWN) f*aw*n	**Certain Vowel Sounds with R**	
U	(FUL) f*u*ll	AHR	(PAHR) p*ar*
OO	(FOOD) f*oo*d	ER	(PER) p*air*
OU	(FOUND) f*ou*nd	IR	(PIR) p*eer*
O	(FO) f*oe*	OR	(POR) p*our*
EI	(FEIT) f*i*ght	OOR	(POOR) p*oor*
AI	(FAIT) f*a*te	UHR	(PUHR) p*urr*
OI	(FOIL) f*oi*l		
YOO	(FYOOR-ee-uhs) f*ur*ious		

Consonants			
B	(BED) *b*ed	R	(RED) *r*ed
D	(DET) *d*ebt	S	(SET) *s*et
F	(FED) *f*ed	T	(TEN) *t*en
G	(GET) *g*et	V	(VET) *v*et
H	(HED) *h*ead	Y	(YET) *y*et
HW	(WHICH) *wh*ich	W	(WICH) *w*itch
J	(JUHG) *j*ug	CH	(CHUHRCH) *ch*urch
K	(KAD) *c*ad	SH	(SHEEP) *sh*eep
L	(LAIM) *l*ame	TS	(ITS) i*ts*
M	(MAT) *m*at	TH	(THEI) *th*igh
N	(NET) *n*et	TH	(THEI) *th*y
NG	(SING-uhr) si*ng*er	ZH	(A-zhuhr) a*z*ure (VI-zhuhn) vi*s*ion
P	(PET) *p*et	Z	(GOODZ) goods

Examples of Phonetically Spelled Names	
Name on Ballot	**Pronounced As**
Mishaud	mee-SHO ('d' is silent)
Jahn	HAHN (rhyme: fawn)
Beauprez	boo-PRAI (rhyme: hooray)
Maniscalco	man-uh-SKAL-ko
Tangipahoa	TAN-ji-pah-HO-uh
Monte	Mahn-TAI
Tanya	TAWN-yuh (not TAN)
Pittsfield	PITS-feeld
Hubbardston	HUH-buhz-tuhn

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