

# CANDIDATE'S STATEMENT

I, \_\_\_\_\_, do  
(Please print as you wish name to appear on ballot)

solemnly swear (or affirm) that I am a candidate for the office of  
\_\_\_\_\_ in the City of Rockledge, Florida.

I do further swear (or affirm) that I am a qualified voter of the City of  
Rockledge, Florida, and that I am qualified under the Charter and Ordinances  
of said city to hold the office of

\_\_\_\_\_ in the City of Rockledge, Florida,  
and that I have paid the assessment fee of \$\_\_\_\_\_ levied against me in  
accordance with the Ordinances of said City for said office.

\_\_\_\_\_  
Signature of Candidate

Sworn to and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 2020 by means of physical presence.

Personally Known • Produced ID

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
City Clerk or Designee