## GLIY CLERK CANDIDATE OATH NONPARTISAN OFFICE 10 JUN'24PH3:08:13 (Do not use this form if a Judicial or School Board Candidate) Check box only if you are seeking to qualify as a write-in candidate: CITY OF NORTH PORT Write-in candidate OFFICE USE ONLY Candidate Oath Demetrius Name to appear on ballot: Check box if two last names without hyphen. (Name cannot be changed after qualifying.) Check box if name includes nickname. (For use of a nickname, you must complete the Nickname Affidavit on reverse side.) I swear or affirm that I am a candidate for the nonpartisan office of City Commission (Office) [Circuit #) (Group or Sect #) ; I am a qualified elector of Sava so ta Commission (Circuit #) (Group or Seat #) (Circuit #) 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. Statement of Outstanding Fines, Fees, or Penalties l owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.). YES, I Do NO, I Do Not X If you do, you must also specify the amount owed and each entity that levied the same on the reverse side. Petrowagmail.com Address of Legal Residence STATE OF FLORIDA COUNTY OF Salasaa Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: Sworn to (or affirmed) and subscribed before me by means of physical presence online notarization OR HEATMER FAUST \_ day of June **Notary Public** State of Florida Personally Known OR Produced Identification Comm# HH410040 Type of Identification Produced: DKIJUKS License Emires 8/11/2027

DS-DE 302NP (Eff. 10/2023)

Rule 1S-2.0001, F.A.C.

Phonetic Spelling of Name				
Phonetic spelling for the audio ballot ( wish it to be pronounced on the audio ba				
Statem	ent of Outstanding F	ines, Fees or Penalties		
Pursuant to Section 99.021(1)(d), F.S., candidate, shall, at the time of subscribin or penalties that cumulatively exceed \$25 and Employees under part III of chapter 106.	g to the oath or affirmation, sta 50 for any violations of s. 8, Art.	te in writing whether he or she owes II of the State Constitution, the Cod	s any outstanding fines, fees, e of Ethics for Public Officers	
Amount		Entity		
Affidavit of l	Nickname (Only require	ed if using nickname for the ba	allot.)	
My legal name isaffidavit are true and correct.		I am over the age of eighteen	(18) and the contents of this	
My nickname is of my legal name. I have not created the a political slogan or otherwise associate	e nickname to mislead voters. I	My nickname does not imply I am s	kname or have used it as part come other person, constitute	
Signature of Candidate:	trusPetron			
STATE OF FLORIDA COUNTY OF SOLUSION		Signature of Notary Public		
Sworn to (or affirmed) and subscribed be of online notarization \( \bigcup OR \) phy this \( \bigcup \bigcup OR \) day of \( \bigcup OR \) Produce Type of Identification Produced: \( \bigcup	sical presence, 20 24. ed Identification	Print, Type, or Stamp Commission  HEATHER  Notary Pur  State of File  Expires 8/2	R FAUST blic orida H410040	

DS-DE 302NP (Eff. 10/2023)

Rule 1S-2.0001, F.A.C.



May 17, 2024

Ms. Heather Faust City Clerk 4970 City Hall Blvd North Port FL 34286

Re: Candidate Petitions

Dear Ms. Faust:

The petitions submitted by **<u>Demetrius Petrow</u>** a candidate for the office of <u>**City of**</u> North Port Commissioner, District 1, have been verified by my office. There were a total of 29 valid signatures from electors residing in the City of North Port.

If you have any questions, please contact my office at (941) 861-8606.

Sincerely,

Ron Turner

Supervisor of Elections

RT/sm

**Ron Turner** 

Supervisor of Elections

**Petition Status Report** 

Sarasota County, FL

Petition Id 23-26		on Short Descr etrius Peti	•	NP Comm Se		trict	Date Petition Opened 13-Febru	on uary-2024	Petition Number 685
		Signatures Claimed	Sigs checked	<u>Unchecked</u> <u>Signatures</u>	Signatures Required	Valid Sigs	Rejected Sigs including Duplicates	Duplicate Sigs	
Batch	1	30	30	0		29	1	0	
			30	0	0	29	1	0	
Grand Total	:	30	30	0	0	29	1	0	

## **Congressional District**

Batch Number	17		Total	
1		29		29
Total		29		29

Date 5/17/2024

Time 11:03 AM