

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 by means of physical presence this

_____ day of _____, 2021.

• Personally Known • Produced ID

Notary Public

City Clerk or Designee