

Mayor Residency Affidavit

State of Florida
County of Marion

Before me, an officer authorized to administer oaths, personally appeared
* _____ to me well known,
who, being sworn, says that he or she is a candidate for the office of Mayor; that he or she is a qualified elector of the City of Ocala, Marion County, Florida; that he or she is qualified under the Constitution and the laws of Florida and the City Charter of the City of Ocala to hold the office of mayor and that he or she is a resident of the City of Ocala currently and shall have been a resident of the City of Ocala for not less than one (1) year prior to his or her election to office.

Signature

Address

The foregoing Mayor Residency Affidavit was sworn to and subscribed before me on this _____ day of _____, 2019 by _____ who is personally known to me or who has produced a driver's license, and who did take an oath.

Notary Public, State of Florida At Large
My Commission Expires:

* Please print name as you wish it to appear on the ballot