

CANDIDATE OATH NONPARTISAN OFFICE

JUN 8 2020 12:01

(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:

Write-in Candidate

JUN 8 2020 PM 12:00
OFFICE USE ONLY

Name to appear on ballot: LISA FEARON

- 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 nonpartisan office of Everlands Community Development
District Seat 3 (Office)
3 (District #), 3 (Circuit #), 3 (Group or Seat #); I am a qualified elector of BREVARD 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 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.)

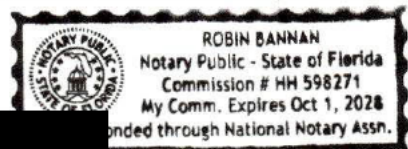
I do not / I do owe outstanding fines, fees, or penalties that cumulatively exceed \$250, for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure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

Signature of Candidate: [Signature] Telephone Number: (561) 767 6820 Email Address: lisa.fearon@yaho.com
Address of Legal Residence: 1244 Blessed Isles Dr NW City: PD State: FL ZIP Code: 32907

STATE OF FLORIDA
COUNTY OF Brevard

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

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence
this 7th day of June, 2020.
Type of Identification Produced: FL DL



RECEIVED
JUN 08 2026

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).

LISA FEAR ON

Detailed Statement of Outstanding Fines, Fees, or Penalties
(Continued)

Amount	Entity

Affidavit of Nickname
(Only required if using nickname for the ballot)

My legal name is ~~LISA FEAR ON~~. 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 _____

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

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence
this _____ day of _____, 20____.

Type of Identification Produced: _____