CANDIDATE PETITION Notes: - All information on this form becomes a public record upon receipt by the Supervisor of Elections It is a crime to knowingly sign more than one petition for a candidate. [Section 104.185, Florida Statutes] - If all requested information on this form is not completed, the form will not be valid as a Candidate Petition form.			
I,			the undersigned, a registered voter
(print name as it appears on your voter information card) in said state and county, petition to have the name of Mario Jimenez, M.D.			
placed on the Primary/General Election Bal	lot as a: [check/complete box, as appli	icable]	
□ Nonpartisan □ No party affiliation □			Party candidate for the office of
Florida Senator District 37			
(insert title of office and include district, circuit, group, seat number, if applicable)			
Date of Birth or Voter Registrat (MM/DD/YY)	ion Number Address		
City	County	State	Zip Code
Signature of Voter			Date Signed (MM/DD/YY) [to be completed by Voter]

DS-DE 104 (Eff. 09/11)

Rule 1S-2.045, F.A.C.