

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

Please print or type your name, mailing address, agency name, and position below:

LAST NAME — FIRST NAME — MIDDLE NAME:
 Van Vorst Kristine Jatczak

MAILING ADDRESS:
 201 E. University Ave.
 Room 200

CITY: ZIP: COUNTY:
 Gainesville 32601 Alachua

NAME OF AGENCY:
 Eighth Judicial Circuit

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
 County Judge

CHECK IF THIS IS A FILING BY A CANDIDATE

2020 APR 20 PM 05:21

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2019 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of April 13, 20 2020 was \$ 1,701,849.61.

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 238,797.97

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See attached.	

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See Instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Campus Credit Union Navigator Loan	52,344.58

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
None.	

PART D -- INCOME

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

I elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See Instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
State of Florida	200 E. Gaines St., Tallahassee, FL	151,822.00

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person—see Instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None.			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	None.	None.	None.
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

PART F - TRAINING

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

[Handwritten Signature]

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA

COUNTY OF Alachua

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 17th day of

April, 2020 by Amber Allen

[Handwritten Signature]
 (Signature of Notary Public--State of Florida)

Amber Allen

(Print, Type, or Stamp Commissioned Notary Public Name, or My Commission # GG 094893)

Personally Known OR Produced Identification April 17 2021

Type of Identification Produced Notary Public
 State of Florida Notary Public
 Bonded thru Budget Notary Services

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature

Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

Kristine Van Vorst

Addendum to Form 6

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Assets

REDACTED FS 119.071, Gainesville Florida Residence	950,000	
2018 Lincoln Navigator	65,000	
Charles Schwab College Savings*	14,864	
Charles Schwab Rollover IRA*	226,634	
Charles Schwab Roth IRA*	4,910	
T Rowe Price Deferred Compensation*	106,302.40	
Fidelity Brokerage Account*	54,007.38	
Fidelity Individual 529 College Savings Account*	5,476.62	
Fidelity Individual 529 College Savings Account*	5,487.92	
Wells Fargo Checking (ending in 8750)	22,042.88	
Wells Fargo Checking (ending in 2528)	50,087.11	
Wells Fargo (ending in 9278)	583.91	
Ameris Bank Campaign Account (ending in 2828)	10,000	
Household goods and personal effects	238,797.97	
Total Assets		1,754,194.19

Liabilities

Campus Credit Union Navigator loan	52,344.58	
Total Liabilities		52,344.58

Net Worth as of April 13, 2020 1,701,849.61

*See attached Contents of Investment Accounts.

Kristine Van Vorst

Addendum to Form 6

Contents of Investment Accounts

Charles Schwab College Savings Plan

-John Hancock Portfolio 2021-2024

Charles Schwab Rollover IRA

-Schwab US Large Cap ETF; SPDR Portfolio Emerging Markets; Artisan International Value Fund; Blackrock Health Sciences Opportunities Portfolio; Invesco Oppenheimer Developing Markets Fund; Pimco Total Return Fund; Cohen & Steers Realty Shares; Wisdomtree Dynamic Currency Hedged Internal Equity Fund; Doubleline Total Return Bond Fund; Invesco S&P 500 Equal Weight ETF; Doubleline Schiller Enhanced Cape Fund; Invesco Oppenheimer International Growth Fund; Alerian MLP; Wisdomtree Floating Rate Treasury Fund; Victory Shares US Discovery Enhanced Volatility WTD ETF; Invesco S&P 500 Equal Weight Consumer Staples ETF; Natixis Loomis Sayles Strategic Income Fund; Schwab US Aggregate Bond ETF; Invesco S&P 500 Enhanced Value ETF; iShares 0-5 Year TIPS Bond; SPDR S&P 400 Mid Cap Value ETF; TCW Emerging Markets Income Fund; O'Shares FTSE US Quality Dividend; Invesco Oppenheimer Senior Floating Rate Fund; Cohen and Steers Preferred Securities and Income Fund; Cash Sweep Account

Charles Schwab Roth IRA

-Schwab Market Track Growth, Cash Sweep Account

Nationwide 457 Deferred Compensation

-T. Rowe Price Retire 2040, T. Rowe Price Retire 2030

Fidelity Brokerage Account

-SPDR S&P 500 ETF Trust; iShares Dow Jones US Medical Device ETF; Vanguard Information Technology ETF; Financial Select Sector SPDR Fund; O'Shares FTSE US Quality Dividend ETF; Fidelity MSCI Industrials Index ETF; Fidelity MSCI Materials Index ETF; Fidelity Cash

Fidelity College 529 Savings Account

-NH Portfolio 2027 (Fidelity Funds)

Fidelity College 529 Savings Account

-NH Portfolio 2027 (Fidelity Index)

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Form 6A. Disclosure of Gifts, Expense Reimbursements or Payments, and Waivers of Fees and Charges

2020 APR 20 PM05:21

All judicial officers must file with the Florida Commission on Ethics a list of all reportable gifts accepted, and reimbursements or direct payments of expenses, and waivers of fees or charges accepted from sources other than the state or a judicial branch entity as defined in Florida Rule of Judicial Administration 2.420(b)(2), during the preceding calendar year as provided in Canons 5D(5)(a) and 5D(5)(h), Canon 6A(3), and Canon 6B(2) of the Code of Judicial Conduct, by date received, description (including dates, location, and purpose of event or activity for which expenses, fees, or charges were reimbursed, paid, or waived), source's name, and amount for gifts only.

Name: Kristine Van Vorst Work Telephone: 352/374-3644

Work Address: 201 E. University Ave, Rm 200 Judicial Office Held: County Judge
Gainesville FL 32601

1. Please identify all reportable gifts, bequests, favors, or loans you received during the preceding calendar year, as required by Canons 5D(5)(a), 5D(5)(h), and 6B(2) of the Code of Judicial Conduct.

DATE	DESCRIPTION	SOURCE	AMOUNT
	None.		\$
			\$
			\$
			\$

Check here if continued on separate sheet

2. Please identify all reportable reimbursements or direct payments of expenses, and waivers of fees or charges you received during the preceding calendar year, as required by Canons 6A(3) and 6B(2) of the Code of Judicial Conduct.

DATE	DESCRIPTION (Include dates, location, and purpose of event or activity for which expenses, fees, or charges were reimbursed, paid or waived)	SOURCE
	None.	

Check here if continued on separate sheet

CONTINUE TO PAGE 2 FOR OATH

OATH

State of Florida

County of Alachua

I, Kristine Van Vorst, the public official filing this disclosure statement, being first duly sworn, do depose on oath and say that the facts set forth in the above statement are true, correct, and complete to the best of my knowledge and belief.

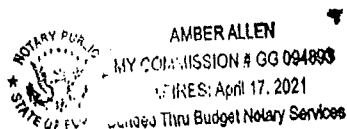
[Signature]
(Signature of Reporting Official)

Amber Allen
(Signature of Officer Authorized to Administer Oaths)

My Commission expires 4/17/21

Sworn to and subscribed before me this

17th day of April, 20 20



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Form 6B. Report of Business Interests

2020 APR 20 PM 05:21

Instructions: List the names of any corporations or business entities, not otherwise identified on Form 6, in which you had a financial interest as of December 31 of the preceding year. If no business interests, or the interests are already identified on Form 6, then indicate "None," or "N/A." Attach additional pages as necessary. This form is filed only with the JQC.

Name of Judge: Kristine Van Vorst Telephone: 352/374-3644

Address: 201 E. University Ave, Rm 200 Position: County Judge
Gainesville FL 32601

Name of Business Entity

Address of Business Entity

None.

I certify that the foregoing information is complete, true, and correct.

[Signature]
JUDGE'S SIGNATURE

OATH

State of Florida,
County of Alachua.

Sworn to (or affirmed) and subscribed before me by means of

physical presence or online notarization, this 17th day of April,

2020, by Kristine Van Vorst (Name of Judge).

[Signature]
(Signature of Notary)

Notary Seal

Personally Known , or Produced Identification .

Identification Produced: _____

