CANDIDATE OATH JUDICIAL OFFICE

Check box *only* if you are seeking to qualify as a write-in candidate:

Write-in candidate

DS-DE 303JU (Eff. 10/2023)

2024 APR 22 PM 12: 03

BROWARD COUNTY SUPERVISOR OF ELECTIONS

OFFICE USE ONLY

Rule 1S-2.0001, F.A.C.

Candidate Oath				
Name to appear on ballot: Jill K. Levy				
Check box if two last names without hyphen. (Name cannot be changed after qualifying.)				
Check box if name includes nickname.	(For use of a nickname, you i	must complete the Nickname Affidavit or	n reverse side.)	
I swear or affirm that I am a candidate for the jud	licial office of County Jud	ge (Office)	(District #)	
17th; 29; my	legal residence is Broward	A (%)	County, Florida;	
I am a qualified elector of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the constitution and laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent to the office I seek; I have resigned from any office which I am required to resign pursuant to s. 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.				
Section 876.05, Florida Statutes (only applicable if elected and when term of office begins): I am a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.				
Statement of Outstanding Fines, Fees, or Penalties				
I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 105.031(4) F.S.).				
YES, I Do NO, I Do Not X				
If you do, you must also specify the amount o	If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.			
X (954)831-7302 reelectjudgejilllevy@gmail.c				
Signature of Candidate	Telephone Number	Email Addres	SS	
Address of Legal Residence	City	State	ZIP Code	
STATE OF FLORIDA		Joseph Mills		
COUNTY OF CHOWARD		ture of Notary Public Type, or Stamp Commissioned Name of	Notany Public below:	
Sworn to (or affirmed) and subscribed before me l	by means of	Type, or clamp commissioned name or	Notelly I dolle below.	
online notarization OR physical pretthis 22 day of Personally Known OR Produced Identification Produced:	, 20 <u>214</u> .	Claudette Hamilton Commission # HH 344941 Commission Expires 02-20-2027 Bonded Through - Cynanotary Florida - Notary Public		
. 7				

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BROWARD COUNTY SUPERVISOR OF ELECTIONS



Phonetic Spelling of Name				
Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 3 of this form):				
Statem	ent of Outstanding Fines, Fees or Penalties			
candidate, shall, at the time of subscribir or penalties that cumulatively exceed \$2	, each candidate, whether a party candidate, a candidate with no party affiliation, or a write-ing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, 50 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or			
Amount	Entity			
N/A				
,				
Affidavit of	Nickname (Only required if using nickname for the ballot.)			
My legal name is Jill K. Levy	. I am over the age of eighteen (18) and the contents of this			
affidavit are true and correct.				
My nickname is N/A	. I am generally known by this nickname or have used it as part			
of my legal name. I have not created the	e 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.			
1/1	W			
Signature of Candidate:	/			
STATE OF FLORIDA				
Va / I	la la Hille			
COUNTY OF CHOWARD	Signature of Notary Public			
Sworn to (or affirmed) and subscribed be	Print, Type, or Stamp Commissioned Name of Notary Public below:			
	Sical presence Claudette Hamilton Commission # HH 344941			
this 22 day of Apar	Commission Expires 02-20-2027			
Personally Known OR Produc	ed Identification Florida - Notary Public			

DS-DE 303JU (Eff. 10/2023)

Type of Identification Produced:_

Rule 1S-2.0001, F.A.C.

General Information

Name:

Hon Jill K Levy

CONFIDENTIAL

Address:

201 SE 6th St, Fort Lauderdale, FL 33301

PID 210400

County:

Broward

AGENCY INFORMATION

Organization

Suborganization

Title

Judicial Circuit (17Th)

Elected Constitutional Officer

County Judge

CANDIDATE FOR

Position

Agency Name

Position sought or held

County Judge

17th Judicial Circuit

Broward County Court Judge

Net Worth

My Net Worth as of December 31, 2023 was \$ 10,413,711.00.

Assets

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 effect is \$550,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Private residence #1	\$ 3,326,400.00
Private residence #2	\$ 2,189,600.00
Private residence #3	\$ 1,899,420.00
Investment acct. Truist	\$ 89,831.50
Bank acct. Capital One	\$ 448,889.05
Bank acct. Capital One	\$ 1,092.20
Brokerage acct. Fidelity	\$ 431,978.84
Brokerage acct. Fidelity	\$ 2,521,938.32
Brokerage acct. Fidelity	\$ 18,500.29
Brokerage acct. Wells Fargo	\$ 231,973.83
Bank acct. Wells Fargo	\$ 35,721.70

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Wells Fargo Mortgage	420 Montgomery St., San Francisco, Ca. 94104	\$ 1,331,632.52

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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 2023 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.

l elect to file a copy of my 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
State of Florida	Tallahassee, Fl	\$ 176,315.52

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity #1

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Jill K Levy

Digitally signed: 03/19/2024

Filed with COE: 03/19/2024

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BROWARD COUNTY SUPERVISOR OF ELECTIONS

RECEIP	DATE April 22, 2	024 No. 279035
Seven Thousand	K. Levy Two Hundred Twee	\$72.24.64 ty Four - 64/00 DOLLARS
OFOR RENT Qualif		
ACCOUNT 101	CASH DEPUTY OF	SUPERVISOR OF ELECTIONS
PAYMENT 7224 64	MONEY ORDER	2 1/1/12
BAL. DUE	CREDIT BY	3.Kullis 3.1