## **CANDIDATE OATH** SCHOOL BOARD NONPARTISAN OFFICE

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

282 JUN 15 AM 11: 46

	OFFICE USE ONLY					
Candidate Oath (Section 99.021(1)(a) and 105.031, Florida Statutes)						
I, Nora Rupert	,					
(Print name above as you wish it to appear on the ballot. I	f your last name consists of two or more names but has no mes). No change can be made after the end of qualifying. allot, the name must be printed above for oath purposes.)					
am a candidate for the nonpartisan office of School Boa	rd , <u>7</u> ,					
	(Office) (District #)					
, ; I am a qualified elector of	Broward County, Florida;					
(Circuit #) (Group or Seat #)						
I am qualified under the Constitution and the Laws of Florida to have qualified for no other public office in the state, the term office I seek; and I have resigned from any office from which Statutes; and I will support the Constitution of the United States	of which office or any part thereof runs concurrent with the I am required to resign pursuant to Section 99.012, Florida					
Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the school board 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.						
Candidate's Florida Voter Registration Number (located on yo	ur voter information card): 101394856					
Phonetic spelling for audio ballot: Print name phonetically or ballot as may be used by persons with disabilities (see instruction	the line below as you wish it to be pronounced on the audio s on page 2 of this form): [Not applicable to write-in candidates.]					
X (954) 895-87 Signature of Candidate Telephone Number	'99 norarupert@comcast.net					
4320 NW 3 Street Coconut Cre	ek A Florida 33066					
Address City	State ZIP Code					
STATE OF FLORIDA						
COUNTY OF Brand	Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:					
Sworn to (or affirmed) and subscribed before me by means of						
online notarization OR physical presence this day of , 2022	MARY COONEY Commission # GG 292471 Expires May 3, 2023 Bonded Thru Troy Fain Insurance 800-385-7019					
Personally Known OR Produced Identification						
Type of Identification Produced:						

FORM 6 FULL AND PUBLIC DISCLOSUF	RE 2021
Please print or type your name, mailing address, agency name, and position below:  OF FINANCIAL INTERESTS	FOR OFFICE USE ONLY:
LAST NAME — FIRST NAME — MIDDLE NAME:	
Rupert, Nora Amelda	EADWAY TO THE
MAILING ADDRESS: 600 SE 3rd Avenue	
OOO OE DIE TAVELLE	
CITY: ZIP: COUNTY:	
Fort Lauderdale 33301-3125 Broward	
NAME OF AGENCY : Broward County Public Schools	
NAME OF OFFICE OR POSITION HELD OR SOUGHT:	
Elected Constitutional Officer	
CHECK IF THIS IS A FILING BY A CANDIDATE	
PART A – NET WORTH	
Please enter the value of your net worth as of December 31, 2021 or a more current culated by subtracting your <i>reported</i> liabilities from your <i>reported</i> assets, so please se	date. [Note: Net worth is not cal- e the instructions on page 3.]
My net worth as of <u>June 1</u> , 20 <u>22</u> was \$ <u>822071.4</u>	
HOUSEHOLD GOODS AND PERSONAL EFFECTS:  Household goods and personal effects may be reported in a lump sum if their aggregate value exceed following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic its 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 \$ 65,000.00	s \$1,000. This category includes any of the ems; art objects; household equipment and
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:  DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Home, 4320 NW 3 Street, Coconut Creek, FL 33066	532,000.00
Home, 121 Machon Pt Rd, Murray Harbour, PEI, CA	375,000.00
FRS	123,574.77
Ford Explorere	26,399.00
PART C – LIABILITIES	
LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):	
NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Fedloan, PO Box 5320210, Atlanta, GA	2,286.00
Discovercard, PO Box 6103, Carol Stream, IL	2,327.35
BSCU, PO Box 8966, Fort Lauderdale, FL	11,193.39
Bank of Montreal, 55 Bloor St W, Toronto, ON	70,895.73
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:  NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
TruHome Solutions, LLC, PO Box 14908, Lenexa, KS	219,134.00

	PART D INCOME					
dentify each separate source and a copy of your 2021 federal income to	mount of income which ex	ceeded \$1,000	during the year, including second	ary sources of in	or account numbers before	
copy of your 2021 federal income ta attaching your returns, as the law re	ix return, including all W2: equires these documents t	s, schedules, ar be posted to the	c Commission's website.	y social security	or account no	
I elect to file a copy of my 2	021 federal income tax rel	tax return, you	s, schedules, and attachments. need not complete the remainder	of Part D.1		
III you check this box and a	ttach a copy of your 2020	tax return, you				
PRIMARY SOURCES OF INCOME	(See instructions on pa				AMOUNT	
NAME OF SOURCE OF INCOM			ADDRESS OF SOURCE OF INC		45544.49	
chool Board of Broward	County	600 SE 3rd	d Ave, Fort Lauderdale,	r <u>L</u>	43344.47	
			d by seeding nor	on see instructi	ons on page 5]	
SECONDARY SOURCES OF INC			ADDRESS	,011-3cc		
NAME OF BUSINESS ENTITY	NAME OF MAJOR		OF SOURCE		ACTIVITY OF SOURCE	
		Name of the Assessment				
PA	RT E - INTERESTS I	N SPECIFIE	D BUSINESSES [Instruction	s on page 6]		
	BUSINESS ENTITY		BUSINESS ENTITY # 2	BUS	INESS ENTITY # 3	
NAME OF						
BUSINESS ENTITY ADDRESS OF						
BUSINESS ENTITY						
PRINCIPAL BUSINESS ACTIVITY						
POSITION HELD						
I OWN MORE THAN A 5%						
INTEREST IN THE BUSINESS						
NATURE OF MY OWNERSHIP INTEREST						
		PART F -	TRAINING			
	officers required to com	olete annual et	hics training pursuant to section	n 112.3142, F.S	S. [See instructions p. 6]	
This section applies only to	CEPTIEV THAT I	HAVE COM	PLETED THE REQUIRE	D TRAININ	G.	
	CERTIFICIAL	CT ILLI STATIGUE DE CARRON				
O A	TH	STATI	E OF FLORIDA	2		
OATH  COUNTY OF  Sworn to (or affirmed) and subscribed before me by means of						
I, the person whose name appears at the beginning of this form, do depose on oath or affirmation						
		. 4	UTE (2022 by			
and stay to be property in the						
and any attachments hereto is true, according						
and complete.		1	DALICA TESTE	My Commissio	n GG 357849 <b>S</b>	
n		(Print	Type, or Stamp Commissioned	ame of Notary P	ublich	
IMMA VI	MIDN		****	Produced Identif		
SIGNATURE OF REPORTING	OFFICIAL OR CANDIDA	TE				
		Туре	of Identification Produced			
If a partified public accountant	t licensed under Chapter	473, or attorne	ey in good standing with the Flori	ida Bar prepare	d this form for you, he or	
she must complete the follow	ing statement:					
		, prepared	the CE Form 6 in accordance	with Art. II, Sec.	8, Florida Constitution,	
I, prepared the CE Form's in accordance with Art. It, Good of Formace Statutes, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true						
and correct						
Signatu	TP .		According to the second	Date		
Desparation of this form	by a CPA or attorney	does not rel	ieve the filer of the respons	ibility to sign	the form under oath.	
IF ANY OF PARTS A	THROUGH E ARE	CONTINUE	ON A SEPARATE SHEET	, FLEASE CH	IECK HERE	



Description of Asset	Value of asset
Chase, 4809 Coconut Creek Pkwy, Coconut Creek,FL	3414.15
Mercury Sable	2,520.00

## 2022 JUN 15 PM 4: 05

SUPERVISOR OF ELECTIONS

RECE	IPT DATE	Jun	×152	COND	270007
RECEIVED FROM_	Nora	Bu	nert	\$/	88757
methe	susand (	Jeght !	lundred	nichter	100000
OFOR RENT S	B#70	vali 1	MASS	A.094	ever of AM
ACCOUNT	O CASH	4104			
PAYMENT 188	756 CHEEK	FROM	A DEST	TO.	EGIENS
BAL. DUE	ORDER	BY	ILON	in	
			V	-(-)	3-11