

**CANDIDATE OATH -  
JUDICIAL OFFICE**

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

Write-in candidate

2020 APR 22 PM 6:36

BROWARD COUNTY  
SUPERVISOR OF ELECTIONS

OFFICE USE ONLY

**Candidate Oath**

(Section 105.031, Florida Statutes)

I, Jacob E Segal

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the judicial office of County Court, 17th,  
(Office) (District #) (Circuit #)

27 ; my legal residence is 3819 Hayes Street, Broward County, Florida; I am a qualified elector  
(Group #)

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the 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 with the office I seek; and I have resigned from any office 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.

**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 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.

Candidate's Florida Voter Registration Number (located on your voter information card): 102243098

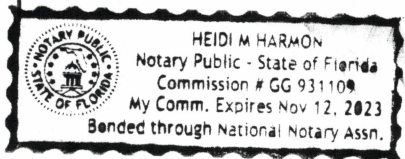
**Phonetic spelling for audio ballot:** Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]  
Jay-Cub See-Gull

**X** [Signature] (954) 2972351 segalfirmmobile@yahoo.com  
Signature of Candidate Telephone Number Email Address  
3819 Hayes Street 9542972351 Florida 33021  
Address City State ZIP Code

STATE OF FLORIDA  
COUNTY OF Broward

[Signature]  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this 22  
day of April, 2020.  
Personally Known:  or Produced Identification:   
Type of Identification Produced: \_\_\_\_\_



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:  
**Segal Jacob E**

MAILING ADDRESS:  
**Boulevard Landmark Building, 2131 Hlwd Blvd, Suite 207**

**Hollywood 33020 Broward**

CITY: **Hollywood** ZIP: **33020** COUNTY: **Broward**

NAME OF AGENCY:  
**17th Judicial Circuit**

NAME OF OFFICE OR POSITION HELD OR SOUGHT:  
**County Court Judge**

CHECK IF THIS IS A FILING BY A CANDIDATE

2020 APR 22 PM 6:37  
 BROWARD COUNTY  
 SUPERVISOR OF ELECTIONS

**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 22, 20 20 was \$ 535,940.00.

**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 \$ 20,000.00

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Residence (Hollywood/Broward County) 3819 Hayes Street, Hlwd FL 33020	360,940.00
Vehicles GMC Yukon, \$5,000.00	5,000.00
SEP Retirement Fund American Funds	64,000.00
Bank Accounts/Cash	86,000.00

**PART C -- LIABILITIES**

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

**JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:**

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

**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
The Segal Law Firm	2131 hollywood boulevard, Suite 207	\$152,250.00

**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

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
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.

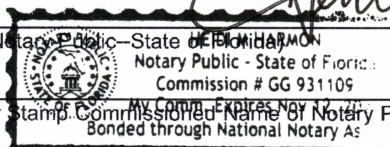
*Jaech*  
 \_\_\_\_\_  
**SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE**

STATE OF FLORIDA  
 COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me by means of  
 physical presence or  online notarization, this 22 day of

April, 2022 by *[Signature]*

(Signature of Notary Public - State of Florida) ERIN HARMON



(Print, Type, or Stamp Commissioned Name of Notary Public)  
 Bonded through National Notary As

Personally Known  OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

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**

# RECEIPT

DATE 4/22/2020 No. 378652

RECEIVED FROM Jacob E Segal \$ 6072.88

Seven thousand seventy-two dollars <sup>88/100</sup> DOLLARS

FOR RENT  Qualifying Fee

ACCOUNT	1902
PAYMENT	6072.88
BAL. DUE	0

- CASH
- CHECK
- MONEY ORDER
- CREDIT CARD

FROM DEPUTY COUNTY SUPERVISOR OF ELECTIONS TO \_\_\_\_\_  
BY [Signature]