

**CANDIDATE OATH –
JUDICIAL OFFICE**

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

Write-in candidate

SUPERVISOR OF ELECTIONS

2022 APR 26 AM 8:37

OFFICE USE ONLY

Candidate Oath

(Section 105.031, Florida Statutes)

I, Tabitha Elise Blackmon,

(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 Judge, 17th,
(Office) (District #) (Circuit #)

17; my legal residence is 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): 118359317

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.]

X [Signature] (954) 646-2673 KeepJudgeBlackmon@gmail.com
Signature of Candidate Telephone Number Email Address

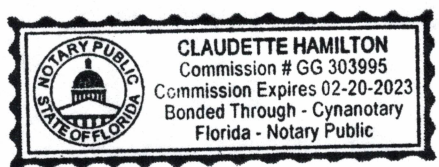
100 N. Pine Island Rd., 20 Plantation FL 33324-7804
Address City State ZIP Code

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 by means of
online notarization OR physical presence
this 26 day of April, 2022
Personally Known OR Produced Identification
Type of Identification Produced: FLDL



General Information

Name: Tabitha Elise Blackmon
 Address: 100 N PINE ISLAND RD STE 210, PLANTATION, FL 33324-7804
 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 | Judicial Circuit (17th) Elected Constitutional Officer | Elected Constitutional Officer County Court Judge |

Net Worth

My Net Worth as of December 31, 2021 was \$ 242,204.80.

| Assets | |
|---|----------------|
| <p>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.</p> <p>The aggregate value of my household goods and personal effect is \$ <u>50,000.00</u>.</p> | |
| ASSETS INDIVIDUALLY VALUED AT OVER \$1,000: | |
| Description of Asset | Value of Asset |
| 18.5% ownership of | \$ 87,110.00 |
| Bank of America accounts | \$ 30,000.00 |
| Personal vehicle | \$ 32,000.00 |
| Life Insurance Annuity with American National Insurance Company (total \$500,000) | \$ 2,655.48 |
| Household goods | \$ 50,000.00 |
| FRS | \$ 15,439.32 |
| Jewelry | \$ 25,000.00 |

| Liabilities | | |
|---|---------------------|---------------------|
| LIABILITIES IN EXCESS OF \$1,000: | | |
| Name of Creditor | Address of Creditor | Amount of Liability |
| N/A | | |
| JOINT AND SEVERAL LIABILITEIS 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.

PRIMARY SOURCES OF INCOME:

| Name of Source of Income Exceeding \$1,000 | Address of Source of Income | Amount |
|--|---|---------------|
| State of Florida | Chief Financial Officer, 200 E. Gaines Street, Tallahassee, FL 32399-0356 | \$ 156,377.04 |

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

| Business Entity | Major Sources of Business Income | Address | 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 filing and that the facts stated in it are true.

Tabitha Blackmon



Digitally signed: 4/25/2022

Filed with COE: 04/25/2022

RECEIPT DATE April 26, 2022 No. 279147

RECEIVED FROM Tabitha E. Blackmon \$6255.08

Six Thousand Two Hundred Fifty Five ^{08/100} DOLLARS

FOR RENT
 FOR Qualifying Fee

| | | |
|-----------|----------------|---|
| ACCOUNT # | <u>1002</u> | <input type="checkbox"/> CASH |
| PAYMENT | <u>6255.08</u> | <input checked="" type="checkbox"/> CHECK |
| BAL. DUE | <u>—</u> | <input type="checkbox"/> MONEY ORDER |
| | | <input type="checkbox"/> CREDIT CARD |

DEPUTY OF SUPERVISOR OF ELECTIONS

FROM _____ TO _____

BY [Signature]

3-11

SUPERVISOR OF ELECTIONS
 2022 APR 26 AM 8:37