# 2023 Form 1 - Statement of Financial Interests

General Inf	formation		
Name:	Mr Jose M Lopez		
Address:	4109 HEATHERBROO	0K PL, MIDDLEBURG, FL 32068	
County:	Clay		
Organization		Suborganization	Title
N/A			
CANDIDATE F	OR		
Position		Agency Name	Position sought or held
Special District	:	Armstrong Cdd	Seat 5
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Disclosure Period								
THIS STATEMENT REFLECT	S YOUR FINANCIAL I	NTERESTS FOR	CALEND	AR YEAR EN	DING DECEN	ABER 31, 202	3.	
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Primary Sources of Incom	rimary Sources of Income			
RIMARY SOURCE OF INCOME (Over If you have nothing to report, write	\$2,500) (Major sources of income to the reportin "none" or "n/a")	ng person)		
Name of Source of Income	Source's Address	Description of the Source's Principal Business Activity		

### **Secondary Sources of Income**

SECONDARY SOURCES OF INCOME (Major customers, clients, and other sources of income to businesses owned by the reporting person) (If you have nothing to report, write "none" or "n/a")

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

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Real Property							
REAL PROPERTY (Land (If you have nothing t	d, buildings owned by the reporting person) o report, write "none" or "n/a")	0	<u>S</u>	UP .			
Location/Descriptio	n						
N/A	6	A	Ø	MAN	1	Nor.	-
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INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. over\$10,000) (If you have nothing to report, write "none" or "n/a")				
Type of Intangible	Business Entity to Which the Property Relates			
Joint checking account	Community First Credit Union			
Joint Saving account	Community First Credit Union			
Checking account	Community First Credit Union			
Saving account	Community First Credit Union			
Saving account	Navy Federal Credit Union			
VW Auto Loan	Community First Credit Union			
Subaru Auto Loan	Community First Credit Union			
Personal Loan	Community First Credit Union			
Work 401k	Fidelity investments			

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## Liabilities

LIABILITIES (Major debts valued over \$10,000): (If you have nothing to report, write "none" or "n/a")

Name of Creditor	Address of Creditor
N/A	

Interests in Specified Businesses					
INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses) (If you have nothing to report, write "none" or "n/a")					
Business Entity # 1					
Name of Business Entity	Comparion Insurance Agency				
Address of Business Entity	8789 San Jose Blvd Ste 110, Jacksonville, FL 32217				
Principal Business Activity	Insurance Agency				
Postion Held with Entity	Leads Sales Representative				
l own more than a 5% Interest in the Business	No				
Nature of my Ownership Interest	None				
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### **Signature of Filer**

Jose M Lopez

Digitally signed: 06/10/2024