

**CANDIDATE OATH  
STATE AND LOCAL PARTISAN OFFICE  
WRITE-IN CANDIDATE**

**RECEIVED**

**JAN 10 2023**

DUVAL COUNTY ELEC.  
By BS

OFFICE USE ONLY

**Candidate Oath**

(Section 99.021(1)(a), Florida Statutes)

I, BREAN MICKS,

(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.)

am a write-in candidate for the office of CITY COUNCIL DISTRICT, 10, \_\_\_\_\_,  
(Office) (District #) (Circuit #)

\_\_\_\_\_ ; my legal residence is DUVAL County, Florida; I am a qualified elector  
(Group or Seat #)

under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; 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 from 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.

**Candidate's Florida Voter Registration Number** (located on your voter information card): 114099074

<u>X</u> <u>Bm mks</u> Signature of Candidate	<u>16788551889</u> Telephone Number	<u>BREANMICKS12021@gmail.com</u> Email Address
<u>PO Box 12181</u> Address	<u>JACKSONVILLE</u> City	<u>FL</u> State
		<u>32209</u> ZIP Code

STATE OF FLORIDA

COUNTY OF DUVAL

Brenda K. Byles  
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 10<sup>th</sup> day of January, 2023.

Personally Known  OR Produced Identification   
Type of Identification Produced: FL Driver Lic.

BRENDA K. BYLES  
Notary Public, State of Florida  
My Comm. Expires 08/15/2023  
Commission No. GG366249

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DUVAL COUNTY ELEC.  
By BB

**General Information**

Name: Mr Brian Micheal Hicks Sr  
Address: P.O. Box 12181, Jacksonville, FL 32209  
County:

Organization	Suborganization	Title
N/A		

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
Jacksonville City Council	Dist. 10	CC Dist 10

**Net Worth**

My Net Worth as of December 31, 2022 was 300,000.00

**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 .

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
	N/A

<b>Liabilities</b>		
LIABILITIES IN EXCESS OF \$1,000:		
Name of Creditor	Address of Creditor	Amount of Liability
	N/A	
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:		
Name of Creditor	Address of Creditor	Amount of Liability
	N/A	

<b>Income</b>			
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	
Ssdi	Social Security ministration	\$ 1,300.00	
Ssa	1300 Dunn ave	\$ 1,300.00	
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			

<b>Interests in Specified Businesses</b>
<b>Business Entity # 1</b>
N/A

**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.

***Brian Micheal Hicks Sr***

Digitally signed: 01/09/2023

For Qualifying  
Purposes Only