

**CANDIDATE OATH  
STATE AND LOCAL PARTISAN OFFICE  
WITH PARTY AFFILIATION**

RECEIVED  
JAN 11 2023

DUVAL COUNTY ELEC.  
By VH

OFFICE USE ONLY

**Candidate Oath**

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

I, Terrance Freeman,

(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.)

am a candidate for the office of Jacksonville City Council, At Large,  
(Office) (District #) (Circuit #)

1; 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.

**Statement of Party**

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

I am a member of the Republican Party; I have been a registered member of this political party, for which I am seeking nomination as a candidate, for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, by the executive committee of the above-stated political party.

Candidate's Florida Voter Registration Number (located on your voter information card): 111018625

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):  
\_\_\_\_\_

<b>X</b> 	(904) 449-6267	Tfreeman@coj.net	
Signature of Candidate	Telephone Number	Email Address	
3738 Southside Blvd., Suite 101	Jacksonville	Florida	32216
Address	City	State	ZIP Code

STATE OF FLORIDA  
COUNTY OF Duval

  
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 9th day of January, 2023.

Personally Known  OR Produced Identification

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

ANNETTE STOWERS  
Notary Public, State of Florida  
My Comm. Expires 04/20/2023  
Commission No. GG325750

**General Information**

Name: Terrance Edward Freeman  
 Address: 117 W Duval St Ste 425, Jacksonville, FL 32202 PID 275181  
 County: Duval

**AGENCY INFORMATION**

Organization	Suborganization	Title
Jacksonville	Council & Constitutional Officers	City Council Member, At-Large Group 1
Jacksonville	Jacksonville International Airport Area Redevelopment Agency	City Council Member, At-Large Group 1
Jacksonville	Renew Arlington Community Redevelopment Area	City Council Member, At-Large Group 1
Jacksonville	Soutel/Moncrief Retail Redevelopment Area	City Council Member, At-Large Group 1

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
Jacksonville City Council	Jacksonville City Council	At Large, Group 1

**Net Worth**

My Net Worth as of December 31, 2022 was \$ 661,188.03.

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 01/09/2023

**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 \$ 150,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
House	\$ 635,000.00
Land	\$ 100,000.00
Acura MDX	\$ 9,000.00
GMC Yukon	\$ 4,500.00
Audi A6	\$ 16,500.00
Chevrolet Suburban	\$ 60,000.00
Wells Fargo Savings	\$ 5,000.00
VYSTAR Money Market	\$ 60,000.00
Valley Bank Checking	\$ 3,825.00
Mutual Fund: Vanguard 500	\$ 62,187.53
Mutual Fund: Vanguard Extended Market Index	\$ 36,863.62
Mutual Fund: GQG Partners International Equity CIT D	\$ 26,789.00
Wells Fargo Savings	\$ 5,000.00
VYSTAR Checking	\$ 4,100.00

2022 Form 6 - Full and Public Disclosure of Financial Interests

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<b>Liabilities</b>		
LIABILITIES IN EXCESS OF \$1,000:		
Name of Creditor	Address of Creditor	Amount of Liability
RP Funding Inc	RP Funding Inc. PO Box 660592, Dallas, Texas. 75266-0592	\$ 444,600.00
VYSTAR Credit Union	Vystar Credit Union P.O. Box 45085 Jacksonville, Florida 32232	\$ 13,000.00
VYSTAR Credit Union	Vystar Credit Union P.O. Box 45085 Jacksonville, Florida 32232	\$ 56,680.00
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	
Miller Electric Company	6805 Southpoint Pkwy. Jacksonville, FL. 32216	\$ 39,361.00	
City of Jacksonville	117 W. Duval St. Jacksonville, FL. 32202	\$ 33,400.00	
3-Divas Inc	1243 Gorham St. Jacksonville, FL. 32226	\$ 35,400.00	
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
3 Divas Inc	Pointe Vedra Athletic Assoc	PO Box 3260, Ponte Vedra Beach, FL. 32004	Sports Development

**Interests in Specified Businesses**

**Business Entity # 1**

N/A

**Training**

- I certify that I have completed the required training under Section 112.3142, F.S.
- Required training under Section 112.3142, F.S., not applicable to filer for this form year.

**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.

***Terrance Edward Freeman***

Digitally signed: 01/09/2023

Filed with COE: 01/09/2023



RECEIVED

JAN 11 2023

DUVAL COUNTY ELEC.  
By VH

**TERRANCE E FREEMAN CAMPAIGN FUND**

1243 GORHAM ST  
JACKSONVILLE, FL 32226

1003

Date 1/11/2023

CHECK ARMOR  
FRAUD PROTECTION

Pay To The Order of Supervisor of Elections

\$ 3,408.24

Three-Thousand Four Hundred Eight and  $\frac{24}{100}$  Dollars

Security Features Details on Back.



AMERIS BANK

For Qualifying Fee

[Signature] MP