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

RECEIVED

JAN 0 6 2023

DUVAL COUNTY ELEC. By VH

OFFICE USE ONLY				
Candidate Oath  (Section 99.021(1)(a), Florida Statutes)  (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 (Office) (Offic				
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 Perrocratic 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): 103785 659				
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):    The first contact of the pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form):				
Signature of Candidate  Signature of Candidate  Telephone Number  Telephone Number  Tooksonville FL 32209  Address  City  State  ZIP Code				
STATE OF FLORIDA  COUNTY OF				
online notarization OR physical presence Herman Dr. Notary Public, State of Florida My Comm. Expires 08/15/2023  Type of Identification Produced: OR Dr. Notary Public State of Florida My Comm. Expires 08/15/2023  Commission No. GG366249				

### RECEIVED

## 2022 Form 6 - Full and Public Disclosure of Financial Interests

JAN 06 2023

DUVAL COUNTY ELEC. By\_\_\_\_\_\_\_

**General Information** 

Name:

Vanessa Elaine Cullins Hopkins

Address:

3283 EDGEWOOD AVE W, JACKSONVILLE, FL 32209

County:

Duval

Organization

Suborganization

Title

N/A

**CANDIDATE FOR** 

Position

Agency Name

Position sought or held

Jacksonville City Council

City of Jacksonville, Duval County

City Council, District 10

### **Net Worth**

My Net Worth as of <u>December 31, 2022</u> was \$ 1,131,000.00.

#### 2022 Form 6 - Full and Public Disclosure of Financial Interests

#### 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 \$50,000.00.

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

Value of Asset
\$ 500,000.00
\$ 900,000.00
\$ 120,000.00
\$ 270,000.00
\$ 400,000.00
\$ 100,000.00

#### Liabilities

#### LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Wells Fargo	P.O. Box14411 Des Moines, IA 50306	\$ 563,000.00
Bank of America	P.O. Box 31785 Tampa, FL 33631	\$ 63,000.00
Goodleap	8781 Sierra CollegeBlvd. Roseville, CA 95661	\$ 95,000.00
Mosaic Loan	P.O. Box 78080 Phoenix, AZ 85062	\$ 126,000.00
PHH MORTGAGE	P.O. Box 5452 Mt. Laurel, NJ 08054	\$ 265,000.00
Wells Fargo	P.O. Box14411 Des Moines, lA 50306	\$ 47,000.00

#### JOINT AND SEVERAL LIABILITIES 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
Social Security Administration	6401 Security Blvd Baltimore, MD 21235	\$ 32,000.00

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			

## **Interests in Specified Businesses**

**Business Entity #1** 

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.

# Vanessa Elaine Cullins Hopkins

Digitally signed: 01/06/2023



#### OFFICE OF THE SUPERVISOR OF ELECTIONS

MIKE HOGAN SUPERVISOR OF ELECTIONS OFFICE: (904) 255-3444 CELL: (904) 219-8924 105 EAST MONROE STREET JACKSONVILLE, FLORIDA 32202 FAX: (904) 255-3434 E-MAIL: MHOGAN@COJ.NET

December 30, 2022

Vanessa Cullins Hopkins Candidate for City Council 3283 Edgewood Ave. W. Jacksonville, FL 32209

#### Dear Vanessa:

I am happy to inform you that you have obtained the required number of valid signatures on your candidate petitions for the office of City Council. This certification only excuses you from paying the qualifying fee and any party assessment when seeking to qualify for this office. The certification does not excuse you from submitting other qualifying papers required by the Florida Election Code.

However, please note that when you dispose of surplus campaign funds, you must comply with Section 106.141(7), Florida Statutes, which provides:

Any candidate who filed an oath stating that he or she was unable to pay the fee for verification of petition signatures without imposing an undue burden on his or her personal resources or on resources otherwise available to him or her shall reimburse the state or local government entity, whichever is applicable, for such waived fee. If there are insufficient funds in the account to pay the full amount of the fee, the remaining funds shall be disbursed in the above manner until no funds remain. All funds disbursed pursuant to this subsection shall be remitted to the qualifying officer.

If you need additional information, please contact Lana Self at (904) 255-3429.

Sincerely.

Mike Hogan

Supervisor of Elections.