

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

**RECEIVED**

**JAN 09 2023**

DUVAL COUNTY ELEC.  
By VH

OFFICE USE ONLY

**Candidate Oath**

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

I, Jason Fischer

(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 Duval County Property Appraiser, \_\_\_\_\_, \_\_\_\_\_,  
(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.

**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): 103686524

**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):

<u>X</u> Signature of Candidate	<u>(904) 610-3171</u> Telephone Number	<u>Jason@JasonForFlorida.com</u> Email Address
<u>2630 Stonegate Dr</u> Address	<u>Jacksonville</u> City	<u>Florida 32223</u> State ZIP Code

STATE OF FLORIDA

COUNTY OF Duval

Sworn to (or affirmed) and subscribed before me by means of  
online notarization  OR physical presence   
this 9<sup>th</sup> day of January, 2023.

Personally Known  OR Produced Identification

Type of Identification Produced: FL Driver Lic.

Brenda K. Byles  
Signature of Notary Public  
Print, Type, or Stamp Commissioned Name of Notary Public below:

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

**General Information**

Name: Hon Jason Michael Fischer  
Address: 2630 Stonegate Dr, Jacksonville, FL 32223  
County:

Organization	Suborganization	Title
N/A		

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
Property Appraiser	Duval County	Duval County Property Appraiser

**Net Worth**

My Net Worth as of December 31, 2022 was \$ 393,630.91.

For Official Purposes Only

## 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 \$ 35,000.00.

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

Description of Asset	Value of Asset
2630 Stonegate Dr., Jacksonville, Florida, 32223	\$ 207,929.00
Bank of America	\$ 56,486.60
CSX Stock Fund	\$ 65,593.28
HNTB Retirement Plan	\$ 59,721.47
HNTB Ownership Plan	\$ 22,476.36
Vanguard Total Stock Market Index Admiral CL	\$ 41,563.37
Thrift Savings Plan	\$ 74,860.83

### Liabilities

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

Name of Creditor	Address of Creditor	Amount of Liability
Lakeview Loaning Servicing	PO Box 8058, Virginia Beach, VA, 23450	\$ 170,000.00

#### JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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

### 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	200 E Gaines Street, Tallahassee, Florida 32315	\$ 23,366.00

#### 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.

***Jason Michael Fischer***

Digitally signed: 01/05/2023

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Jason Fischer Campaign  
1722 NW 80th Blvd, Suite 90  
Gainesville, FL 32606

Bank of America

001004

1/3/2023

Duval County Supervisor of Elections

\$11,070.60

Eleven Thousand Seventy Dollars and Sixty Cents \*\*\*\*\*

Duval County Supervisor of Elections  
105 E. Monroe Street  
Jacksonville, FL 32202



Security Features Included Details on back

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ACTIVE INK

