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JAN 13 2023

DUVAL COUNTY ELEC. By VH

OFFICE USE ONLY

CANDIDATE OATH STATE AND LOCAL PARTISAN OFFICE WITH PARTY AFFILIATION

Candidate Oath

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

I, Rahman Johnson (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, 14 (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 Democratic 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): 103402812

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):

X [Signature] Signature of Candidate Telephone Number: (904) 629-1334 Email Address: rahman@rahmanjohnson.com Address: P.O. Box 40213 City: Jax State: FL ZIP Code: 32203

STATE OF FLORIDA COUNTY OF Duval

Lana G. Self Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below:

LANA G. SELF Notary Public, State of Florida My Comm. Expires 08/09/2025 Commission No. HH162692

Sworn to (or affirmed) and subscribed before me by means of online notarization [ ] OR physical presence [X] this 13th day of January, 2023. Personally Known [ ] OR Produced Identification [X] Type of Identification Produced: FL Driver License

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**General Information**

Name: Mr Rahman K. Johnson  
Address: Post Office Box 40213, Jacksonville, FL 32203  
County: Duval

Organization	Suborganization	Title
N/A		

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
Jacksonville City Council	Jacksonville City Council - Jacksonville, FL	Jacksonville City Council District 14

**Net Worth**

My Net Worth as of December 31, 2022 was \$ 150,857.00.

For Confidentiality 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 \$ 40,000.00.

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

Description of Asset	Value of Asset
Primary Home	\$ 298,000.00
Jacksonville Property	\$ 15,000.00
Starke Property 1	\$ 7,000.00
Starke Property 2	\$ 6,500.00
Bank Account	\$ 8,000.00
Mutual Funds (retirement)	\$ 8,500.00

### Liabilities

#### 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		

## 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
Edward Waters University	1658 Kings Road Jacksonville, FL 32209	\$ 45,000.00
First Coast Talent	100 Festival Park Avenue Jacksonville, FL 32202	\$ 20,000.00

#### 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

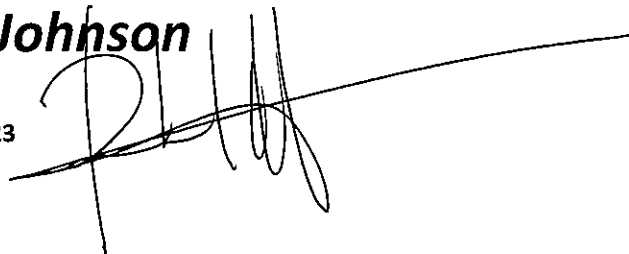
N/A

### 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.

**Rahman K. Johnson**

Digitally signed: 01/13/2023



CAMPAIGN ACCOUNT FOR RAHMAN JOHNSON  
FOR CITY COUNCIL DISTRICT 14  
PO BOX 40213  
JACKSONVILLE FL 32203-0213

01/12/23

1012

January 13, 2023  
DATE

PAY TO THE ORDER OF

Duval County Supervisor of Records \$ 3408.24  
Three thousand four hundred eight and 24/100 DOLLARS



VyStar  
Credit Union  
P.O. Box 45885 Jacksonville, FL 32232-5085

FOR

*Qualif See*

*[Signature]*

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