

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

**RECEIVED**

**JAN 13 2023**

DUVAL COUNTY ELEC.  
By VH

OFFICE USE ONLY

**Candidate Oath**

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

I, Tameka Gaines Holly,

(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 City Council , 8, ,  
(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 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): 105133983

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):

TUH-MEE-KAH GAINS HAW-LEE

X Tameka Gaines Holly (904) 878-3372 votetameka@gmail.com  
Signature of Candidate Telephone Number Email Address  
1036 Dunn Ave, Ste 4-240 Jacksonville FL 32218  
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Duval

Kelli Donald  
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 13 day of January, 2023.

Personally Known  OR Produced Identification

Type of Identification Produced: FL Drivers License



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2022 Form 6 - Full and Public Disclosure of Financial Interests

DUVAL COUNTY ELEC.  
By VH

**General Information**

Name: Tameka Gaines Holly  
Address: 1036 DUNN AVE, JACKSONVILLE, FL 32218  
County: Duval

Organization	Suborganization	Title
N/A		

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
Jacksonville City Council	Jacksonville City Council	District 8

**Net Worth**

My Net Worth as of December 31, 2022 was \$ 749,693.00.

## 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 \$ 25,000.00.

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

Description of Asset	Value of Asset
Primary residence	\$ 600,000.00
Rental property	\$ 250,000.00
Bank Accounts - VyStar (Savings, Checking, Money Market)	\$ 110,000.00
Retirement Funds (Mutual of America & Alerus)	\$ 65,000.00
Life Insurance - American Income Life Insurance	\$ 30,000.00

### Liabilities

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

Name of Creditor	Address of Creditor	Amount of Liability
Vystar Credit Union	PO Box 45085, Jacksonville, FL 32232	\$ 206,817.00
Mr. Cooper	PO Box 619098, Dallas, TX 75261	\$ 123,490.00

#### 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
Northeast Florida Area Agency on Aging dba ElderSource	10688 Old St Augustine Rd, Jacksonville, FL 32257	\$ 114,000.00

#### 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.

***Tameka Gaines Holly***

Digitally signed: 01/12/2023


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DUVAL COUNTY ELEC.  
By VII

CAMPAIGN ACCOUNT FOR TAMEKA GAINES HOLLY [REDACTED] 1001  
1036 DUNN AVE STE 4240  
JACKSONVILLE FL 32218

January 13, 2023  
DATE

PAY TO THE ORDER OF Supervisor of Elections \$3,408.24  
three thousand ~~four hundred~~ eight dollars and 24/100 DOLLARS  Security Features Details on Back.

 **VyStar**  
Credit Union  
P.O. Box 45085 • Jacksonville, FL 32232-5085

FOR Qualifying Fee  
[REDACTED] [REDACTED]

Tameka Gaines Holly