

**CANDIDATE OATH
SCHOOL BOARD OFFICE**

Check box **only** if you are seeking to qualify
as a write-in candidate:

☐ Write-in candidate

RECEIVED

JUN 11 2024

DUVAL COUNTY ELEC.
By [Signature]

OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: REGINALD "Reggie" BLOUNT

Check box if two last names without hyphen. ☐ (Name cannot be changed after qualifying.)

Check box if name includes nickname. ☒ (For use of a nickname, you must complete the Nickname Affidavit on reverse side.)

I swear or affirm that I am a candidate for the office of DUVAL COUNTY SCHOOL BOARD, 5;
(Office) (District #)

I am a qualified elector of DUVAL County, Florida; I am a qualified elector 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.

Section 876.05, Florida Statutes (only applicable if elected and when term of office begins): I am a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the court system and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Statement of Outstanding Fines, Fees, or Penalties

I owe outstanding fines, fees, or penalties, that cumulatively exceed \$250, for ethics or campaign finance violations (s. 99.021(1)(d), F.S.).

YES, I Do ☐ NO, I Do Not ☒

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X [Signature] (910) 583-4294 blountreg@mail.com
Signature of Candidate Telephone Number Email Address
7893 Stearnboat Springs Dr JACKSONVILLE FL 32210
Address of Legal Residence City State ZIP Code

STATE OF FLORIDA

COUNTY OF DUVAL

[Signature]
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 11 day of JUNE, 2024.

Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: FLDL



CIERRA ALEXXUS M FACKLER
Commission # HH 422514
Expires July 17, 2027

Phonetic Spelling of Name

Phonetic spelling for the audio ballot (not required for qualifying purposes): Print the 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 3 of this form):

Statement of Outstanding Fines, Fees or Penalties

Pursuant to Section 99.021(1)(d), F.S., each candidate, whether a party candidate, a candidate with no party affiliation, or a write-in candidate, shall, at the time of subscribing to the oath or affirmation, state in writing whether he or she owes any outstanding fines, fees, or penalties that cumulatively exceed \$250 for any violations of s. 8, Art. II of the State Constitution, the Code of Ethics for Public Officers and Employees under part III of chapter 112, any local ethics ordinance governing standards of conduct and disclosure requirements, or chapter 106.

Amount	Entity

Affidavit of Nickname (Only required if using nickname for the ballot.)

My legal name is Reginald Blount. I am over the age of eighteen (18) and the contents of this affidavit are true and correct.

My nickname is Reggie. I am generally known by this nickname or have used it as part of my legal name. I have not created the nickname to mislead voters. My nickname does not imply I am some other person, constitute a political slogan or otherwise associate me with a cause or issue, or that is obscene or profane.

Signature of Candidate: [Signature]

STATE OF FLORIDA

COUNTY OF Duval

[Signature]

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 11 day of June, 2024.

Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: FLDL



CIERRA ALEXXUS M FACKLER

Commission # HH 422514

Expires July 17, 2027

2023 Form 6 - Full and Public Disclosure of Financial Interests

General Information

Name: Reginald Keith Blount
Address: 7893 Steamboat Springs Drive, Jacksonville, FL 32210
County: Duval

RECEIVED

JUN 11 2024

DUVAL COUNTY ELEC.
Title

Organization Suborganization

N/A

CANDIDATE FOR

Position	Agency Name	Position sought or held
District School Board	School Board, Duval County, Jacksonville, FL	Duval County School Board District 5, Jacksonville, FL

Net Worth

My Net Worth as of December 31, 2023 was \$ 157,104.00.

2023 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 \$ 80,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
FRS Investment Plan	\$ 12,036.00
CASH Bank	\$ 4,016.85
Insurence Investment	\$ 280,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
UPGRADE	275 BATTERY ST FL 23 SAN FRANCISCO, CA 94111	\$ 18,376.00
BRIDGECREST	7300 E HAMPTON AVE MESA, AZ 85209	\$ 17,876.00
MILITARY STAR	3911 S WALTON WALKER BLV DALLAS, TX 75236	\$ 5,556.00
SERVICE FCU	3003 LAFAYETTE RD PORTSMOUTH, NH 03801	\$ 4,194.00
JPMCB CARD	PO BOX 15369 WILMINGTON, DE 19850	\$ 2,894.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

2023 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. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
DEFAS	8899 E 56th Street Indianapolis, IN 46249-1200	\$ 62,226.80
FLORIDA STATE COLLEGE JACKSONVILL	601 W State St. Jacksonville, FL 32205	\$ 33,100.00
DEFAS VA	6th Street Indianapolis, IN 46249-1200	\$ 49,200.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses

Business Entity # 1

N/A

2023 Form 6 - Full and Public Disclosure of Financial Interests

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.

Reginald Keith Blount

Digitally signed: 06/09/2024

For Qualifying
Purposes Only

REGINALD K. BLOUNT
FOR SCHOOL BOARD
7893 STEAMBOAT SPRINGS DR
JACKSONVILLE, FL 32210-1401

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DATE JUNE 11, 2024

PAY TO THE
ORDER OF SUPERVISOR OF ELECTIONS

\$ 2,136.24

Two Thousand One Hundred Thirty Six Dollars and 24/100

DOLLARS



MEMO

DURING FEE

[Signature]

