

**CANDIDATE OATH -
STATE AND LOCAL PARTISAN OFFICE**

Check applicable one:

- Candidate with party affiliation
- Candidate with no party affiliation
- Write-in candidate

RECEIVED

DEC 28 2018

DUVAL COUNTY ELEC.
By ZS

OFFICE USE ONLY

Candidate Oath

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

I, LeAnna Cumber

(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. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the office of City Council, 5, _____,
(Office) (District #) (Circuit #)

_____ ; I am a qualified elector of Duval County, Florida; I am qualified
(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)

(Complete Statement of Party only if you are seeking to qualify for nomination as a party candidate.)

I am a member of the Republican Party; I have not been a registered member of any other political party 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, as a candidate for said office by the executive committee of the political party, of which I am a member.

Candidate's Florida Voter Registration Number (located on your voter information card): 118640444

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): [Not applicable to write-in candidates.]

lee-ANuh kuhm-buhr

X _____ (202) 355-8760 leanna.cumber@gmail.com

Signature of Candidate Telephone Number Email Address
2325 River Road Jacksonville FL 32207
Address City ZIP Code

STATE OF FLORIDA
COUNTY OF DUVAL

Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me this 4th
day of DECEMBER, 2018.
Personally Known: X or Produced Identification: _____
Type of Identification Produced: _____



Please print or type your name, mailing address, agency name, and position below:

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:

CUMBER LEANNA MARIA GUTIERREZ

MAILING ADDRESS:

2325 RIVER ROAD

CITY:

JACKSONVILLE

ZIP:

32207

COUNTY:

DUVAL

NAME OF AGENCY:

JACKSONVILLE CITY COUNCIL

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

CITY COUNCIL MEMBER FOR DISTRICT 5

CHECK IF THIS IS A FILING BY A CANDIDATE

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By LS

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2018 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of DECEMBER 31, 20 18 was \$ 7,057,992.29.

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

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 effects (described above) is \$ 500,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)

VALUE OF ASSET

SEE ATTACHED

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

SEE ATTACHED

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

PART D -- 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 2018 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 2018 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2018 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
SEE ATTACHED		

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
SEE ATTACHED			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	SEE ATTACHED		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

PART F - TRAINING

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

OATH

STATE OF FLORIDA
 COUNTY OF Duval

Sworn to (or affirmed) and subscribed before me this 28th day of December, 2018, by LeAnna Cumber

[Redacted Signature]
 (Signature of Notary Public--State of Florida) LANA G. SELF
 Notary Public, State of Florida
 My Comm. Expires 07/29/21
 Commission No. GG102927

Personally Known X OR Produced Identification _____

Type of Identification Produced _____

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

[Redacted Signature]
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Signature

Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

Cumber, LeAnna Maria Gutierrez
Form 6, Full and Public Disclosure of Financial Interests – 2018
Supporting Schedules

Part B – Assets

Assets Individually valued at over \$1,000

Household Goods	\$500,000.00
Cash – Bank Accounts	
Bank of America Personal Accounts (Savings and Checking)	\$62,923.27
Bank of America Business Accounts for H.A. Cumber & Company (S Corp) (Savings and Checking)	\$26,661.66
US Senate Federal Credit Union	\$1,467.90
Merrill Lynch Savings UTMA	\$110,742.78
Merrill Lynch Savings UTMA	\$57,155.25
Merrill Lynch Personal Account	\$440,361.43
Merrill Lynch Business Accounts	\$762,139.28
Marketable Securities	
Merrill Lynch Investment Account (Jointly Owned)	\$222,004.92
ETrade Stock Account (Jointly Owned)	\$980,940.24
Merrill Lynch Investment Account (Jointly Owned)	\$47,940.86
Retirement Accounts	
Merrill Lynch 401(k)	\$51,615.01
Merrill Lynch SEP	\$115,390.72
Merrill Lynch IRRA	\$33,431.13
Merrill Lynch IRRA	\$297,356.67
Corporation Interests	
Blue Longhorns LLC* (Jointly Owned)	\$1,533,530.26
Florida Real Estate Investment Fund (Jointly Owned)	\$51,464.00
Life Insurance	
John Hancock Life Insurance (2 nd to Die Policy)	\$76,379.07
Prudential Life Insurance (Spouse Insured)	\$49,126.13
Lincoln Financial Group (Spouse Insured)	\$170,749.91
Trust	
Merrill Lynch (Family Trust Account)	\$17,341.87
529 College Plan	
Merrill Lynch 529	\$138,643.90
Personal Loans	

Chris Schulten	\$160,425.00
Solis Energy	\$90,358.06

Real Estate

2325 River Road, Jacksonville, FL 32207	\$1,273,307.00
252 Warren Street, NE, Washington, DC 20002	\$615,297.00
1348 A Monroe Street, NW, Washington, DC 20010	\$632,500.00

Total **\$8,519,253.32**

*Investments and cash held by Blue Longhorns, LLC include:

- Baby & Co.
- Bank of America Checking Account
- Biscayne Bay Brewing Company, LLC
- ChaoLogix
- Dreamit
- Merrill Lynch Checking Account
- New Fortress Energy

Part C – Liabilities

Liabilities in Excess of \$1,000

Name and Address of Creditor

Amount of Liability

Merrill Lynch/Bank of America Mortgage, 50 N. Laura Street, Jacksonville, FL 32202	\$767,938.16
Merrill Lynch/Bank of America Mortgage, 50 N. Laura Street, Jacksonville, FL 32202	\$280,000.00
Nationstar/Mr. Cooper Mortgage, P.O. Box 650783, Dallas, TX 75265-0783	\$356,460.02
US Senate Federal Credit Union (auto loan), 2750 Eisenhower Avenue, Alexandria, VA 22314	\$56,862.85

Total **\$1,461,261.03**

Part D – Income

Primary Sources:

Name of Source of Income Exceeding \$1,000	Address of Source Income	Amount
H.A. Cumber & Company, Inc. (W-2)	2002 San Marco Blvd., Ste. 202, Jacksonville, FL 32207	\$170,000.00
H.A. Cumber & Company, Inc. (distributive share of partnership gross income)	2002 San Marco Blvd., Ste. 202, Jacksonville, FL 32207	\$200,000.00

Secondary Sources of Income

Name of Business Entity	Name of Major Sources of Business Income	Address of Source	Principal Business Activity
H.A. Cumber & Company, Inc.	Delaware River Partners	200 N. Repauno Avenue, Gibbstown, NJ 08027	Port and Rail Terminal
H.A. Cumber & Company, Inc.	New Fortress Energy	700 NW 1 st Avenue, Suite 700, Miami, FL 33136	Energy Infrastructure

Part E – Interests in Specified Business

<i>Name of Business Entity</i>	Blue Longhorns LLC
<i>Address of Business Entity</i>	2325 River Road, Jacksonville, FL 32207
<i>Principal Business Activity</i>	Family Investment Vehicle
<i>Position Held With Entity</i>	Managing Member
<i>I Own More Than a 5% Interest in the Business</i>	Yes
<i>Nature of My Ownership Interest</i>	Membership Interest

Blue Longhorns LLC has an 8% equity ownership in Biscayne Bay Brewing Company, LLC