

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

Check applicable one:

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

RECEIVED

JAN 02 2019

DUVAL COUNTY ELEC.
By AS

OFFICE USE ONLY

Candidate Oath

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

I, JIM OVERTON
(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.)

I am a candidate for the office of TAX COLLECTOR, DUVAL COUNTY, _____, _____,
(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): 103 837 178

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.]*

Signature of Candidate

Telephone Number

Email Address

Address

City

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
day of December, 2018.

Personally Known: or Produced Identification: _____

Type of Identification Produced: _____



REBECCA ADAMS
Notary Public, State of Florida
My Comm. Expires October 2, 2019
Commission No. FF 917564

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:

OVERTON, JAMES NOWLIN

MAILING ADDRESS:

3751 OAK POINT AVE

CITY:

JACKSONVILLE, FL 32210

ZIP:

COUNTY:

DUVAL

NAME OF AGENCY:

CITY OF JACKSONVILLE

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

DUVAL COUNTY TAX COLLECTOR

CHECK IF THIS IS A FILING BY A CANDIDATE

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DUVAL COUNTY ELEC.

By JS

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 12/31/2018, 20 ____ was \$ 1,442,970.00.

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 \$ 100,000.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
SEE ATTACHED WORKSHEET	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
SEE ATTACHED WORKSHEET	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
NONE	

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 WORKSHEET		

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
NONE			

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	NONE		
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			

per FS 112.3142(2)(d): this training is assumed after **PART F - TRAINING** not due until 12/31/19 since I assumed after
 For officers required to complete annual ethics training pursuant to section 112.3142, F.S. office
 I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING. 3/31/18. pro

OATH

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.

STATE OF FLORIDA
 COUNTY OF Duval

Sworn to (or affirmed) and subscribed before me this 19th day of

December 2018 by REBECCA ADAMS

(Signature of Notary Public--State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public) My Comm. Expires October 2, 2019
 Commission No. FF 917564

Personally Known OR Produced Identification

Type of Identification Produced _____

 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

Form 6 Worksheet:
James N. Overton
as of December 31, 2018

Part A - Assets:

Residence:	
3751 Oak Point Ave, Jacksonville FL 32210	730,402
Condominium: (1/5 interest): Unit 101, 7870 A1A S, Crescent Beach, FL	63,280
Condominium: (1/5 interest): Unit 104, 7870 A1A S, Crescent Beach, FL	45,200
Vacant Land Levy County Florida:	
00354 (1/5 interest)	1,453
01159 (1/5 interest)	17,600
01894 (1/5 interest)	5,880
01993 (1/4 interest)	10,780
Vacant Land Transylvania County, NC	124,330
2nd home: 2000 Fairmont Blvd, Knoxville, TN	269,000
Household goods and personal effects	100,000
2015 Volkswagen Touareg	23,000
1967 Scheibe SF-27 sailplane/trailer (1/3 interest)	3,000
1983 G81 Std Cirrus sailplane/trailer	20,000
Cash in Banks	24,569
401K - Mass Mutual	8,112
457B - Empower Retirement	131,048
IRA - Franklin/Templeton	223,572
Total Assets	1,801,226

Part C - Liabilities:

Mortgage on Residence - TIAA	130,226
Mortgage on 2nd home - Regions	205,000
Credit Cards	1,602
Volkswagen Credit - 2015 Touareg	21,428
Total Liabilities	358,256
Net Worth	1,442,970

Part D - Income:

Primary Sources of Income:

Florida Retirement System	96,280
Empower Retirement	118,800
Scenic Jacksonville	45,800
City of Jacksonville	16,045
Total Income	260,880

JIM OVERTON
CAMPAIGN ACCOUNT
3751 OAK POINT AVE
JACKSONVILLE, FL 32210-4345

1021

DATE January 7, 2019

PAY TO THE ORDER OF Duval County Supervisor of Elections \$ 9,619.38

Nine thousand six hundred nineteen and 38/100 DOLLARS



ACH R/T 083100277

FOR Qualifying fee for 2019 election



MP