

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

RECEIVED

JUN 13 2024

GADSDEN COUNTY  
SUPERVISOR OF ELECTIONS

OFFICE USE ONLY

**Candidate Oath**

Name to appear on ballot:

Sophia Jackson

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

County Commissioner

3

(Office)

(District #)

; I am a qualified elector of

Gadsden

County, Florida;

(Circuit #)

(Group or Seat #)

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.

**Statement of Party**

I swear or affirm that 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.

**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 of Candidate

Telephone Number

Email Address

5808 Memorial Blue star Hwy Chatt. Fl.

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF GADSDEN

Sworn to (or affirmed) and subscribed before me by means of  
online notarization ☐ OR physical presence ☒

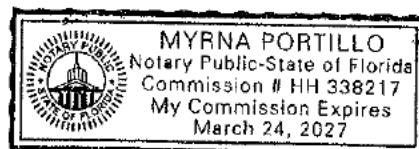
this 13th day of JUNE, 2024

Personally Known ☐ OR Produced Identification ☒

Type of Identification Produced: FL DRIVER LICENSE

Signature of Notary Public

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



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2023 Form 6 - Full and Public Disclosure of Financial Interests

JUN 13 2024

GADSDEN COUNTY  
SUPERVISOR OF ELECTIONS

**General Information**

Name: Sophia L. Grandison-Jackson  
Address: 5808 MEMORIAL BLUE STAR HWY, CHATTAHOOCHEE, FL 32324  
County: Gadsden

Organization	Suborganization	Title
N/A		

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 6	Gadsden County Supervisor of Elections	County Commissioner District 3

**Net Worth**

My Net Worth as of December 31, 2023 was \$ 86,774.00.

## 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 \$ 31,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
property/home	\$ 83,271.00
joint property	\$ 3,503.00
checking account	\$ 3,403.00

### Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
vystar credit union	11343 San Jose Blvd	\$ 24,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

## Income

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

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Gadsden County school district	35 Martin Luther King Blvd Quincy Fl. 32351	\$ 15,832.00
State Of Florida APD	P.O. Box 100 Chattahoochee Fl. 32324	\$ 31,181.00

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

## 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.

***Sophia L Grandison***

Digitally signed: 06/12/2024

For Qualifying  
Purposes Only