

**CANDIDATE OATH -  
JUDICIAL OFFICE**

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

☐ Write-in candidate

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2018 APR 30 PM 12:43

MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT OFFICE USE ONLY

**Candidate Oath**

(Section 105.031, Florida Statutes)

I, JACQUELINE "JACKIE" WOODWARD

(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 judicial office of County Court Judge, 11th,  
(Office) (District #) (Circuit #)

21 ; my legal residence is Miami-Dade County, Florida; I am a qualified elector  
(Group #)

of the state and of the territorial jurisdiction of the court to which I seek election; I am qualified under the Constitution and the Laws of Florida to hold the judicial office to which I desire to be elected or in which I desire to be retained; 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 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, oath** (only applicable if elected and when term of office begins): I, 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.

**Candidate's Florida Voter Registration Number** (located on your voter information card): 109514293

**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.]

"JACK"-uh-"lynn" j AE - k ee W O O D - w e r d

**X**

**Signature of Candidate**

(305) 726-6979

Telephone Number

Jackie4Judge2018@gmail.com

Email Address

1036 Obispo Ave

Coral Gables

Address

City

FL

State

33134

ZIP Code

**STATE OF FLORIDA**

**COUNTY OF** Miami Dade

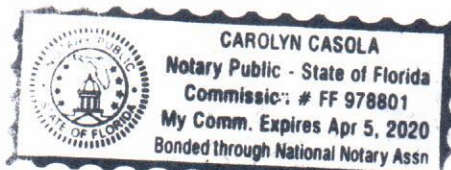
**Signature of Notary Public**

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

Sworn to (or affirmed) and subscribed before me this 30  
day of April, 2018.

Personally Known: ☒ or Produced Identification: ☐

Type of Identification Produced: Known





## FORM 6

## FULL AND PUBLIC DISCLOSURE

2017

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

## OF FINANCIAL INTERESTS

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

LAST NAME — FIRST NAME — MIDDLE NAME:

Woodward - Jacqueline - Michelle

MAILING ADDRESS:

2828 Coral Way

Suite 540

CITY :

Miami

ZIP :

33145

COUNTY :

Miami-Dade

NAME OF AGENCY :

11th Judicial Court of Florida

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Miami-Dade County Court Judge - Group 21

CHECK IF THIS IS A FILING BY A CANDIDATE ☒

## PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2017 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 April 15, 20 18 was \$ 1,538,500.00.

## 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 \$ 50,000

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

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

VALUE OF ASSET

See Attached

2,234,000

## PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

Acura Finance PO Box 1027 Alpharetta GA 30009

17,000

NationStar Mortgage PO Box 619036 Dallas TX

400,000

Iberia Bank PO Box 53207 Lafayette LA 70505

205,000

Regions Bank line of Credit Line PO Box 1984 Birmingham AL 35201

27,500

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

Regions Bank line of Credit Line PO Box 1984 Birmingham AL 35201

27,500

Jm 1/3



**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 2017 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 2017 federal income tax return and all W2's, schedules, and attachments.  
[If you check this box and attach a copy of your 2017 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
Woodward & Reizenstein	2828 Coral Way Suite 540 Miami, FL 33145	159,000
Ofc. Criminal Conflict/3rd Regional	401 NW 2nd Ave #s-310 Miami 33128	15,000

**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
N/A			

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	Woodward & Reizenstein		
ADDRESS OF BUSINESS ENTITY	2828 Coral Way Suite 540 Miami		
PRINCIPAL BUSINESS ACTIVITY	Law Firm		
POSITION HELD WITH ENTITY	Partner		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes		
NATURE OF MY OWNERSHIP INTEREST	Partner		

**PART F - TRAINING**

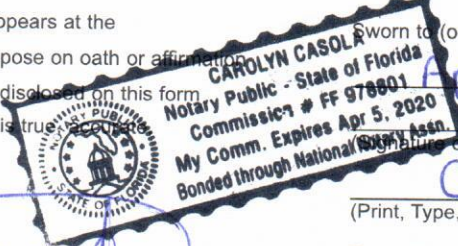
For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

- ☐ I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

**OATH**

STATE OF FLORIDA  
COUNTY OF Miami Dade

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, correct, and complete.



Sworn to (or affirmed) and subscribed before me this 30 day of April, 2018 by Jacqueline Woodward.

Carolyn Casola (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced personally known

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 ☒

*Handwritten initials and page number 3/3*

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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS

FORM 6

JACQUELINE WOODWARD

PART B – ASSETS

DESCRIPTION OF ASSET	VALUE OF ASSET
Home 1036 Obispo Ave Coral Gables FL	950,000
Florida Pre paid College	23,000
Florida Pre paid College	24,000
Child 529 College savings account	47,000
Child 529 College savings account	35,000
Sun Trust Checking account	5,000
Chase Checking account	6,000
Regions Checking account	4,000
Northwestern mutual life ins	15,000
Partnership interest in Woodward & Reizenstein	750,000
Loan to Campaign	375,000



## OFFICIAL RECEIPT

MIAMI-DADE COUNTY-FLORIDA

No. 7359957

RECEIVED FROM Jacqueline Woodward

DATE 04 / 30 / 2018  
MONTH DAY YEAR

ADDRESS 2828 Coral Way Ste 540

CASH \$ \_\_\_\_\_ . \_\_\_\_\_

STREET ADDRESS Miami FL 33145  
CITY STATE ZIP

CHECKS \$ 5,320.80

AMOUNT OF: Five thousand five hundred twenty DOLLARS, AND eighty CENT

TOTAL \$ 5520.80

FOR PAYMENT OF: Qualifying Fee Cnty Court Judge Group 21

THIS RECEIPT NOT VALID UNLESS DATED, COMPLETED AND SIGNED BY AUTHORIZED EMPLOYEE OF DEPARTMENT.

DEPT.: elections By: Will Castro



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[illegible]

107.01-1 6/04

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1061  
MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT

**JACQUELINE WOODWARD**  
**CAMPAIGN ACCOUNT**  
**County Court Judge-Miami Dade**  
2828 Coral Way Ste 540  
Miami, FL 33145

PAY TO THE ORDER OF Miami Dade County DATE 11/20/18  \$ 5520.80  
Five thousand five hundred twenty dollars and eighty cents DOLLARS  Security Features Details on [www.checkarmor.com](#)


**REGIONS**

FOR Qualifying Fee  
County Court Judge Group 21

Woodward