CANDIDATE OATH – STATE AND LOCAL PARTISAN OFFICE

Check applicable one:

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

SUPERVISOR OF ELECTIONS
2020 JUN -8 PM 1:21
PALM BEACH COUNTY, FL

OFFICE USE ONLY

Candidate Oath

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

I, Dorothy Jacks

(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 Property Appraiser , _____ , _____ ,
(Office) *(District #)* *(Circuit #)*

_____ ; my legal residence is Palm Beach County, Florida; I am a qualified elector
(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 Democratic 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): 112419549

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.]*

DOOR-O-THEE JACKS

X [signature]	(561) 689-9787	DorothyJacksPAO@gmail.com
Signature of Candidate	Telephone Number	Email Address

6901 Okeechobee Blvd., Ste D5-L60	West Palm Beach	Florida	33411
Address	City	State	ZIP Code

STATE OF FLORIDA
COUNTY OF PALM BEACH

Sworn to (or affirmed) and subscribed before me by ☒ physical or ☐ online presence this 5th day of June, 2020

Personally Known: X or Produced Identification: _____

Type of Identification Produced: _____

Kim M. LeeBove
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

KIM M. LEEBOVE
Commission # GG 061333
Expires January 10, 2021
Bonded Thru Troy Fain Insurance 800-385-7019

FORM 6 — FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS — 2019

FOR OFFICE USE ONLY:

SUPERVISOR OF ELECTIONS
2020 JUN -8 PM 1:21
PALM BEACH COUNTY, FL

Palm Beach County-Elected Constitutional Officer

**********AUTO**MIXED AADC 323 T5 P1 130 936

DOROTHY ANNE JACKS, PROPERTY APPRAISER
6205 WASHINGTON RD
WEST PALM BCH FL 33405-4133

ID CODE
ID NO. 256921
CONF. CODE
Jacks, Dorothy Anne

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, 2019 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 May 1st, 20 20 was $ 988,065.

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 $ 88,000

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
p/s. see attached sheet	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Homeloan - Hanmer Trust, Charles Schwab	193,939
Car Lease - Audi Financial	1,006
Home Equity Line of Credit - PenFed Credit Union	27,221
(addresses on Attached Sheet)	

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 2019 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 2019 federal income tax return and all W2's, schedules, and attachments.
[If you check this box and attach a copy of your 2019 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
Palm Bch Cty Property Appraiser	301 N. Olive Ave 5th Fl., WPB 33401	$173,525

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	N/A		
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

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.

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Palm Beach

Sworn to (or affirmed) and subscribed before me by means of ☑ physical presence or ☐ online notarization, this 29 day of May, 2020 by Dorothy Jacks.

(Signature of Notary Public--State of Florida)

JOANNE M. RUFTY
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ✓ OR Produced Identification _____

Type of Identification Produced _____

Joanne M. Rufty
NOTARY PUBLIC
STATE OF FLORIDA
Comm# GG177752
Expires 1/27/2022

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 ☒

Dorothy Jacks, Palm Beach County Property Appraiser

2018 Full and Public Disclosure of Financial Interest – Form 6 – Part B

Part B – Assets

457 Retirement Account – Mass Mutual Financial Group	$	366,262.00
6205 Washington Road, West Palm Beach, FL 33405 – home	$	635,284.00
Wyndham Timeshare Property	$	3,000.00
Suntrust Bank Accounts	$	10,506.00
Vanguard Money Market Account	$	50,616.00
Charles Schwab Brokerage Account	$	2,800.00
Audi A6 (Present value-lease residual)	$	6,463.00

Part C. Liabilities (Addresses)

Home Loan – Hamner Trust - P.O. Box 3505, West Palm Beach, FL 33402

Car Lease – Audi Financial - P.O. Box 3, Hillsboro, OR 97123-0003

Home Equity Line of Credit – PenFed Credit Union - Box 1432, Alexandria, VA 22313-2032