## **CANDIDATE OATH** SCHOOL BOARD NONPARTISAN OFFICE SUPERVISOR OF ELECTIONS Check box only if you are seeking to qualify as a 2022 JUN 15 AM 11: 40 write-in candidate: Write-in candidate PALM BEACH COUNTY, FL OFFICE USE ONLY **Candidate Oath** (Section 99.021(1)(a) and 105.031, Florida Statutes) I, Erica Whitfield (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 nonpartisan office of Palm Beach County School Board (Group or Seat #); I am a qualified elector of Palm Beach County, Florida: I am qualified 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. 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 school board 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): 111947517Phonetic 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.] Air-Ick-Uh WIT-Field X (561) 689-9787 ericaforschools@gmail.com Signature of Candidate Telephone Number Email Address 6901 Okeechobee Blvd., Suite D5-L45 West Palm Beach FL 33411 Address City State ZIP Code STATE OF FLORIDA COUNTY OF Palm Beach Signature of Notary Public Print, Type, or Stamp Commissioned Name of Notary Public below: Sworn to (or affirmed) and subscribed before me by means of online notarization OR physical presence X KIM M. LEEBOVE \_\_, 20<u>22</u> Commission # HH 041051 Expires January 10, 2025 Personally Known X OR Produced Identification Bonded Thru Troy Fain Insurance 800-385-7019 Type of Identification Produced:

FORM 6	FULL AN	D PUBLIC	C DISCLOSURE	2021
Please print or type your name, r address, agency name, and posit	nailing OF FII	NANCIAL	INTERESTS	FOR OFFICE USE ONLY
LAST NAME — FIRST NAM	L — MIDDLE NAME:			
Whitfield Erica  MAILING ADDRESS:	Z.	-		UN 15 AM 11:40
133 Duke Drive			PALMB	EACH COUNTY, FL.
CITY:				
Lake Worth Beach	ZIP : 33460	COUNTY: Palm Beac	1.	
NAME OF AGENCY:		Paim Beac	n	
Palm Beach County Scl	100l Board		,	
NAME OF OFFICE OR POSITION Board Member, District	「ION HELD OR SOUGHT: + ∡			
CHECK IF THIS IS A FILING				
SHESK II THIS IS A FILING	BY A CANDIDATE			
		PART A NET V	V∩PTU	
Please enter the value o	f vour net worth as of D	lecember 31 303	11	-t N -t
culated by subtracting yo	our reported liabilities fro	om your reported	assets, so please see the ins	ote: Net worth is not cal-
My net worth as				structions on page 3.]
y was included		, 20	was \$ <u>1,401,717.27</u>	
HOUSEHOLD GOODS AND D	AFDOONAL TOTAL	PART B ASS	SETS	
HOUSEHOLD GOODS AND P Household goods and perso	mal effects may be reported :	in a lump sum if their	r aggregate value exceeds \$1,000.	This sale was a second
furnishings; clothing; other h	estment purposes: jewelry; co ousehold items; and vehicles	ollections of stamps,	r aggregate value exceeds \$1,000. To guns, and numismatic items; art obether owned or located.	pjects; household equipment and
	nousehold goods and persona	personal dee, will	calci owned of leased.	
ASSETS INDIVIDUALLY VALU		renects (described a	bove) is \$	
DESCRIPTIO	N OF ASSET (specific desc	ription is required -	See instructions n 4)	VALUE 07 400-
133 Duke Dr., Lake Wor	rth Beach, FL 33460		νευ που αστίστος μ.τ/	\$1,019,400.00
American Portfolios				\$60,071.65
Great American				\$43,622.79
SEE ATTACHED				\$43,022.79
THE SHARE PROPERTY OF THE PARTY	THE SECOND PROPERTY.	3. 1.76		
LIADUITIES IN EVOLUCIONAL	I	PART C LIABII	LITIES	
LIABILITIES IN EXCESS OF \$1 NAME AND A	1,000 (See instructions on pa DDRESS OF CREDITOR	age 4):		
Mr. Cooper Home Mortg		av121 Rypass I	evicyilla TV 75067	AMOUNT OF LIABILITY
Auto Loan - US Bank, P.	O. Box 790179 St. L.	ouis MO 63170	Dewisville, 1A /300/	\$303,359.05
,	3, 50. 10	0015, 1410 05179		\$2,093.55
JOINT AND SEVERAL LIABILIT	TIES NOT REPORTED ABOV	/E:		
NAME AND A	DDRESS OF CREDITOR			AMOUNT OF LIABILITY
J/A				

				DADTD	Dice	22.55			
Identif	v each separate source	re and amount c	e in a second delication	PART D					
сору о	f your 2021 federal in	come tax return	fincome which ex i. including all W2	kceeded \$1,00	00 during t	the year, including sec hments. Pléase Redá ission's website	condary sourc	es of income. Or	attach a complete
attachi	ng your returns, as th	e law requires t	nese documents	be posted to t	the Comm	nments. ৮[ease reda ission's website.	ct any social s	ecurity or accoun	t numbers before
	l elect to file a conv	of my 2024 fall				2022 111	N 15 AM	111:40	
		and allacin a c	opy of your 2020	tax return, you	u need no	dules, and attachmen of complete the remai PALM BE	ts.	, , , , , , , , , , , , , , , , , , , ,	
PRIMA	RY SOURCES OF IN	ICOME (See in	structions on na	no 5).		PALMBE	EACH COU	NETY, FL.	
NAIV	ME OF SOURCE OF I	NCOME EXCE	EDING \$1,000	ge 5). I					
Schoo	l Board of Palm	Beach Cou	intv	3300 Fore		SS OF SOURCE OF			AMOUNT
				3300 1 0163	St Fill E	Blvd., West Palm	Beach, FL	33406 \$47,1	89.00
SECON	DARY SOURCES O	F INCOME [Maj	or customers, cli	ents, etc., of b	usinesses	s owned by reporting	norson son is		
	NAME OF BUSINESS ENTITY	ı N	MINIT OF INVIOR	SOURCES		ADDRESS	personsee ii		
N/A	BUSINESS ENTIT		OF BUSINESS'	INCOME	+	OF SOURCE		ACTIVITY	L BUSINESS OF SOURCE
14/11									
		DADTE	PIMEDECHO IN		497.53	50 40 60 60 60 50 50	Company of the Spirit	Allo Macana	
		PARIE-I	NTERESTS IN	SPECIFIE	D BUSI	NESSES [Instructi	ions on page	e 6]	
NAME (	OF	BUS	SINESS ENTITY #	:1		SINESS ENTITY # 2		BUSINESS ENT	TTY # 3
BUSINE	SS ENTITY	N/A							
ADDRE BUSINE	SS OF SS ENTITY								
PRINCI	PAL BUSINESS								
ACTIVIT	ON HELD								
WITH E	NTITY								
I OWN I	MORE THAN A 5% ST IN THE BUSINES:								
NATURE	OF MY	3							
OWNER	SHIP INTEREST								
				DADWE .	THE A VALUE	A CONTRACTOR			
This se	action annline only	to officers read		PART F - T	FRAINI	NG			
11.11- 2.			irea to complet	e annual eth	ics traini	ng pursuant to sect	tion 112.3142	2, F.S. [See inst	ructions p. 6]
4-6-5		ICERIII	/ IHAI I HA	VE COMP	PLETE	D THE REQUIR	RED TRAI	NING.	3 to 10 to 1
	0	ATH		STATE	OF FLOR	RIDA .			A CONTRACTOR
1 400				COUNT		Palm Bea	ch		
	erson whose name ap			Sworn to	io (or affir	med) and subscribed	before me by	means of	
peginnii	ng of this form, do de	pose on oath or	affirmation	phys	sical prese	ence or 🔲 online no	otarization, this	1.146	y of
	that the information			_,5	une	, 2022 b	. Erica	- Whitfie	(1)
	attachments hereto	is true, accurate	1,	Line	MI	Park no	y	- Martini	T CX
and con	nplete.			(Signatu	ure of Not	ary PublicState of F	Inrichary Pue	KIM M. LEEBOVE	
		11		Kin	w Mr.	La Rove	A	Commission # HH 0	41051
	1/1			(Print, T	ype, or St	tamp Commissioned	13.00	Expires January 10	2025
					ally Knowr			Bonded Phin Proy Fain In	surance 800-385-7019
SIGNAT	URE OF REPORTIN	G OFFICIAL O	R CANDIDATE			31	Produced lo	lentification	
				Type of I	Identificat	tion Produced	1/K		
If a certif	ried public accounta t complete the follow	nt licensed und	ler Chapter 473,	, or attorney i	n good s	tanding with the Flo	rida Bar prep	pared this form for	or you, he or
I,				propered th	05 5				
Section	112.3144, Florida St	atutes, and the	instructions to	, prepared the the form, Upc	ne CE Fo	rm 6 in accordance asonable knowledge	with Art. II, S	ec. 8, Florida Co	onstitution,
and corre	2 -1		To the state of th		/// /// / / / / / / / / / / / / / / /	Isoliable Kilowieuge	and beliet, t	he disclosure he	rein is true
	ect.								
	ect.								
	Signatu	ıre						Note	
	Signatu	ıre			e the fil		D ibility to si	Note	
Prepara	Signatu	ire by a CPA or	r attorney doe	es not reliev	e the fil	er of the respons	sibility to si	oate gn the form u	nder oath.

## Erica Z. Whitfield, Form 6, 2021 SUPERVISOR OF ELECTIONS

## PART B - ASSETS

## 2022 JUN 15 AM 11: 40

Capital Group	\$3,070.00
Chase	\$2,605.70
Retirement Account - Vanguard	\$22,595.00
Retirement Account - Slavic 401k	\$121,000.00
Chen Moore and Associates Stock	\$400,000.00