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General Information

SUPERVISOR OF ELECTIONS
ELECTION SERVICE CENTER

Name: Mrs Kimberly Sue Works
 Address: [REDACTED]
 County: Pinellas

Organization	Suborganization	Title
N/A		

CANDIDATE FOR

Position	Agency Name	Position sought or held
District School Board	Pinellas County School Board	District 6 seat

Net Worth

My Net Worth as of April 25, 2022 was \$ 37,094.30.

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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 \$ 52,050.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Firearms	\$ 10,000.00
Ammunition	\$ 2,000.00
Computers	\$ 2,000.00
Amateur Radio equipment	\$ 1,100.00
Reloading equipment	\$ 1,200.00
Books- college and pleasure	\$ 1,100.00
Jewelry	\$ 1,100.00
House hold Tools	\$ 1,500.00
Clothes	\$ 1,500.00
TV's	\$ 2,200.00
Camera Equipment	\$ 1,200.00
Lawn mower	\$ 1,250.00
Vehicle VW Tiguan 2019	\$ 15,000.00
Bank of America Account	\$ 2,756.56
USAA Bank Account	\$ 1,555.19
Campaign Loan	\$ 1,600.00

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Liabilities

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LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Bluegreen Vacation Corp	PO Box 11391 Boston, Ma 02211	\$ 18,271.09
Volkswagen Customer CARE	3800 Hamlin Road Auburn Hills, MI 48326-2829	\$ 35,000.00
DCU	220 Donald Lynch Boulevard PO Box 9130 Marlborough, MA 01752-9130	\$ 25,038.93
LightStream	PO Box 117320 Atlanta, GA 30368-7320	\$ 26,337.43
ASHLEY FURNITURE HOMESTORES / SYNCB	SYNCHRONY BANK PO BOX 960061 ORLANDO, FL 32896-0061	\$ 2,188.86
Discover credit card	PO Box 71242 Charlotte NC 28272-1242	\$ 4,104.38
Movement Mortgage	P.O. BOX 100077 Duluth, Georgia 30096	\$ 273,915.86

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
United Healthcare	601 Brooker Creek Blvd, Oldsmar, FL 34677	\$ 18,057.26

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

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

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Interests in Specified Businesses

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Business Entity # 1

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing filing and that the facts stated in it are true.

Kimberly Works

Digitally signed: 5/4/2022