

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

2024 JUN 10 PM12:04

OFFICE USE ONLY

Candidate Oath

Name to appear on ballot: Jason English

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 SANTA ROSA County Clerk of Court ^{Circuit +}
(Office) & Comp Trailer (District #)

(Circuit #) _____; I am a qualified elector of SANTA ROSA County, Florida;
(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 Republican 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 X

If you do, you must also specify the amount owed and each entity that levied the same on the reverse side.

X Jason English
Signature of Candidate

(850) 232-6742

jdenglish@bellsouth.net
Email Address

Protected Address

Address or Legal Residence

City

State

ZIP Code

STATE OF FLORIDA

COUNTY OF Santa Rosa

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

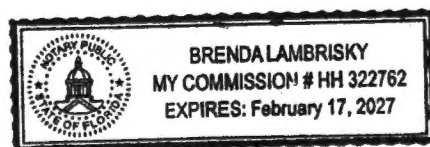
this 20 day of May, 2024

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____

Brenda Lambisky
Signature of Notary Public

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



General Information

Name: Mr Jason Daniel English Esq
Address: ***Protected Address***
County: Santa Rosa

Organization	Suborganization	Title
N/A		

CANDIDATE FOR

Position	Agency Name	Position sought or held
Clerk of the Courts and Comptroller	Santa Rosa County Clerk of Court & Comptroller	Clerk of Court and Comptroller

Net Worth

My Net Worth as of December 31, 2023 was \$ 1,243,600.00.

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 \$ 175,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Protected Address	\$ 592,000.00
Bank Account SRC Federal Credit union	\$ 3,926.30
Bank Account SRC Federal Credit Union	\$ 2,091.00
Bank Account SRC Federal Credit union	\$ 1,780.00
Bank Account The First Bank	\$ 14,000.00
10% Interest in English Venture Capitol LLP	\$ 488,431.63
Loan to Campaign for Clerk of Court	\$ 38,070.00
Morgan Stanley Financial Managment Account Individual account	\$ 15,866.46
Morgan Stanley cash Account	\$ 22,076.34
Florida PrePaid College account	\$ 12,000.00

2023 Form 6 - Full and Public Disclosure of Financial Interests

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

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

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. Or attach a complete copy of your 2023 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 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Santa Rosa County Clerk of Court	6865 Caroline St, Milton FL 32570	\$ 103,783.98
English Venture Capitol	4882 Carlyn Dr, Milton FL 32571	\$ 40,000.00

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

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
English Venture Capital, LLP	Investments	4882 Carlyn Dr Pace FL 32571	Capitol Investments

Interests in Specified Businesses

Business Entity # 1

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form6 and that the facts stated in it are true.

Jason Daniel English Esq

Digitally signed: 05/22/2024