

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/01/2023

General Information

Name: Hon Jacqueline Joan Marie Powell
Address: 201 SE 6th St, Fort Lauderdale, FL 33301
County: Broward

CONFIDENTIAL

PID 86275

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (17Th)	Elected Constitutional Officer	County Court Judge

Net Worth

My Net Worth as of June 1, 2023 was \$ 501,645.98.

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 \$ 90,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home - {REDACTED}	\$ 500,000.00
Savings -PNC Bank	\$ 4,082.62
Checking - PNC Bank	\$ 10,043.69
Capital One Bank	\$ 1,317.97
Life Insurance	\$ 25,000.00
Life Insurance	\$ 172,015.00
Voya	\$ 5,113.52
FRS 2030 Retirement Date Fund	\$ 50,279.00
FRS Stable Value Fund	\$ 10,205.10
FRS US Stock Market Index Fund	\$ 20,454.93
FRS US Stock Fund	\$ 10,278.18

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
AidVantage	P.O. Box 4450 Portland OR 972-4450	\$ 66,446.06
Shellpoint	P.O. Box 740039 Cincinnati OH 45274	\$ 296,793.09
Chase Bank	P.O. Box 469030 Glendale CO 80246	\$ 32,898.38
Bridgecrest	7300 Hampton Avenue, Suite 101, Mesa AZ 85209	\$ 4,557.36

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.

☐ I elect to file a copy of my 2022 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
State of Florida	200 E. Gaines Street Tallahassee, FL 32399-036	\$ 172,015.00

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			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

JpowellDigitally signed: **06/01/2023****Filed with COE: 06/01/2023**