

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 08/10/2023

General Information

Name: Mrs Jessica Lawson

Address: 156 SE PARK ST, MAYO, FL 32066

PID 238573

County: Lafayette

AGENCY INFORMATION

Organization	Suborganization	Title
Mayo	Mayor And Town Council	councilperson

CANDIDATE FOR

Position	Agency Name	Position sought or held
Jacksonville City Council	Town council mayo fl	Set !

Net Worth

My Net Worth as of December 31, 2022 was \$ 95,000.00.

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 \$ 130,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
N/A	

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Florida Credit Union	2831 NW 43rd Street Gainesville FL 32606	\$ 35,237,741.41

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
Barbara Hewett	Mayo FL 32066	\$ 60,000.00

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
Circle of Life	297 SW CR 300 Mayo, FL 32066	\$ 57,000.00

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

☒ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer 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.

Jessica Lawson

Digitally signed: 08/10/2023

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