| FORM 6 | FULL AND PUBLIC DISCL | OSURE | 2016 |
|--|---|------------------------------|--------------------|
| Please print or type your name, mailing address, agency name, and position below | OF FINANCIAL INTERI | ESTS FOR | OFFICE USE ONLY: |
| LAST NAME — FIRST NAME — MIDI | | | |
| MAILING ADDRESS: | | | |
| | | | |
| CITY: | ZIP: COUNTY: | | |
| NAME OF AGENCY : | | | |
| NAME OF OFFICE OR POSITION HE | LD OR SOUGHT : | l | |
| CHECK IF THIS IS A FILING BY A CA | NDIDATE • | | |
| | PART A NET WORTH | | |
| | net worth as of December 31, 2016 or a more orted liabilities from your reported assets, so | | |
| My net worth as of | , 20 was \$ _ | | · |
| | PART B ASSETS | | |
| following, if not held for investment | | mismatic items; art objects; | |
| The aggregate value of my househo | ld goods and personal effects (described above) is \$ | | |
| ASSETS INDIVIDUALLY VALUED AT DESCRIPTION OF A | OVER \$1,000: SSET (specific description is required - see instructi | ons p.4) | VALUE OF ASSET |
| | | | |
| | | | |
| | | | |
| | PART C LIABILITIES | | ' |
| LIABILITIES IN EXCESS OF \$1,000 (S | See instructions on page 4): | | |
| NAME AND ADDRES | 55 OF CREDITOR | | AMOUNT OF LIABILIT |
| | | | |
| | | | |
| | | | |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

| | | PART D - | - 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 2016 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 2016 federal income tax return and all W2's, schedules, and attachments. [If you check this box and attach a copy of your 2016 tax return, you need not complete the remainder of Part D.] | | | | | | |
| PRIMARY SOURCES OF INCO | ME (See instructions on pa | ge 5): | | | | |
| NAME OF SOURCE OF INCO | OME EXCEEDING \$1,000 | | ADDRESS OF SOURCE OF INCOME | AMOUNT | | |
| | | | | | | |
| | | | | | | |
| SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting personsee instructions on page 5]: | | | | | | |
| NAME OF | NAME OF MAJOR SOUP | | ADDRESS | PRINCIPAL BUSINESS | | |
| BUSINESS ENTITY | OF BUSINESS | INCOME | OF SOURCE | ACTIVITY OF SOURCE | | |
| | | | | | | |
| | | | | | | |
| PART E INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6] | | | | | | |
| NAME OF | BUSINESS ENTITY: | # 1 | BUSINESS ENTITY # 2 | BUSINESS ENTITY # 3 | | |
| BUSINESS ENTITY ADDRESS OF | | | | | | |
| BUSINESS ENTITY | | | | | | |
| PRINCIPAL BUSINESS ACTIVITY | | | | | | |
| POSITION HELD WITH ENTITY | | | | | | |
| I OWN MORE THAN A 5% INTEREST IN THE BUSINESS | | | | | | |
| NATURE OF MY OWNERSHIP INTEREST | | | | | | |
| | | | | | | |
| For office | rs required to complete | | TRAINING | 112 31/12 FS | | |
| For officers required to complete annual ethics training pursuant to section 112.3142, F.S. I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING. | | | | | | |
| OTATE OF FLORIDA | | | | | | |
| OATH | | COUN | COUNTY OF | | | |
| I, the person whose name appears at the beginning of this form, do depose on oath or affirmation | | | Sworn to (or affirmed) and subscribed before me this day of | | | |
| and say that the information dis | | | , 20 by | | | |
| and any attachments hereto is | | /Ciana | (Cinnature of Matery Dublic Chate of Florida) | | | |
| and complete. | | (Signal | (Signature of Notary PublicState of Florida) | | | |
| | | (Print, | (Print, Type, or Stamp Commissioned Name of Notary Public) | | | |
| | | Person | ally Known OR Prod | uced Identification | | |
| SIGNATURE OF REPORTING | OFFICIAL OR CANDIDATE | Type o | f Identification Produced | | | |
| If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or | | | | | | |
| she must complete the following | | 3, or attorney | in good standing with the Honda Ba | ai prepared this form for you, he of | | |
| I,, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct. | | | | | | |
| | | | | | | |
| Signature | | | Date | | | |
| Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath. | | | | | | |
| | IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE | | | | | |

NOTICE

Annual Full and Public Disclosure of Financial Interests is due July 1. If the annual form is not filed or postmarked by September 1, an automatic fine of \$25 for each day late will be imposed, up to a maximum penalty of \$1,500. Failure to file also can result in removal from public office or employment. [s. 112.3144, F.S. - applicable to officials other than judges]

In addition, failure to make any required disclosure constitutes grounds for and may be punished by one or more of the following: disqualification from being on the ballot, impeachment, removal or suspension from office or employment, demotion, reduction in salary, reprimand, or a civil penalty not exceeding \$10,000. [s. 112.317, F.S.]

INSTRUCTIONS FOR COMPLETING AND FILING FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS

WHAT TO FILE

File only the first sheet (pages 1 and 2). Facsimiles will not be accepted. A candidate who has filed Form 6 for 2016 with the Commission, prior to qualifying, may file a copy of that Form 6 at the time of qualifying.

WHERE TO FILE

Officeholders: Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303;

<u>Candidates</u>: The officer before whom they qualify. If a Form 6 is filed with a qualifying officer, it need not also be filed with the Commission.

WHEN TO FILE

Officeholders: No later than July 1, 2017. Candidates: During the qualifying period.

WHO MUST FILE FORM 6:

All persons holding the following positions: Governor, Lieutenant Governor, Cabinet members, members of the Legislature, State Attorneys, Public Defenders, Clerks of Circuit Courts, Sheriffs, Tax Collectors, Property Appraisers, Supervisors of Elections, County Commissioners, elected Superintendents of Schools, members of District School Boards, Mayor and members of the Jacksonville City Council, Judges of Compensation Claims;

the Duval County Superintendent of Schools, and members of the Florida Housing Finance Corporation Board, the Florida Prepaid College Board, each expressway authority, transportation authority (except the Jacksonville Transportation Authority), bridge authority, or toll authority created pursuant to Chapter 348 or 343, F.S., or any other general law, and judges, as required by Canon 6, Code of Judicial Conduct.

INSTRUCTIONS FOR COMPLETING FORM 6:

INTRODUCTORY INFORMATION (At Top of Form):

If your name, mailing address, public agency, and position are already printed on the form, you do not need to provide this information unless it should be changed. To change any of this information, write the correct information on the form, and contact your agency's financial disclosure coordinator. You can find your coordinator on the Commission on Ethics website: www.ethics.state.fl.us.

NAME OF AGENCY: The name of the governmental unit which you serve or served, or for which you are a candidate.

OFFICE OR POSITION HELD OR SOUGHT: The title of the office or position you hold, are seeking, or held as of December 31, 2016, even if you have since left that position. If you are a candidate, check the box below your name and address.

PUBLIC RECORD: The disclosure form and everything attached to it is a public record and is required by law to be posted to the Commission's website. Your Social Security number and bank account and credit card numbers are not required and you should redact them from any documents you file. If you are an active or former officer or employee listed in Section 119.071, F.S., whose home address or other information is exempt from disclosure, the Commission will maintain that confidentiality if you submit a written request.

PART A — NET WORTH

[Required by Art. II, s. 8(a)(i)(1), Fla. Const.]

Report your net worth as of December 31, 2016, or a more current date, and list that date. This should be the same date used to value your assets and liabilities. In order to determine your net worth, you will need to total the value of <u>all</u> your assets and subtract the amount of <u>all</u> of your liabilities. <u>Simply subtracting the liabilities reported in Part C from the assets reported in Part B will not result in an accurate net worth figure in most cases.</u>

To total the value of your assets, add:

- (1) The aggregate value of household goods and personal effects, as reported in Part B of this form;
- (2) The value of all assets worth over \$1,000, as reported in Part B; and
- (3) The total value of any assets worth less than \$1,000 that were not reported or included in the category of "household goods and personal effects."

To total the amount of your liabilities, add:

- (1) The total amount of each liability you reported in Part C of this form, except for any amounts listed in the "joint and several liabilities not reported above" portion; and,
- (2) The total amount of unreported liabilities (including those under \$1,000, credit card and retail installment accounts, and taxes owed).

(CONTINUED on page 4)

PART B — ASSETS WORTH MORE THAN \$1,000

[Required by Art. II, s. 8, Fla. Const.; s. 112.3144, F.S.]

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

The value of your household goods and personal effects may be aggregated and reported as a lump sum, if their aggregate value exceeds \$1,000. The types of assets that can be reported in this manner are described on the form.

ASSETS INDIVIDUALLY VALUED AT MORE THAN \$1,000:

Describe, and state the value of, each asset you had on the reporting date you selected for your net worth in Part A, if the asset was worth more than \$1,000 and if you have not already included that asset in the aggregate value of your household goods and personal effects. Assets include, but are not limited to, things like interests in real property; cash; stocks; bonds; certificates of deposit; interests in businesses; beneficial interests in trusts; money owed you; bank accounts; Deferred Retirement Option Program (DROP) accounts; and the Florida Prepaid College Plan. Assets also include investment products held in IRAs, brokerage accounts, and the Florida College Investment Plan. Note that the product *contained in* a brokerage account, IRA, or the Florida College Investment Plan, is your asset—not the account or plan itself.

You are not required to disclose assets owned solely by your spouse.

How to Identify or Describe the Asset:

- Real property: Identify by providing the street address of the property. If the property has no street address, identify by describing the property's location in a manner sufficient to enable a member of the public to ascertain its location without resorting to any other source of information.
- Intangible property: Identify the type of property and the business entity or person to which or to whom it relates. <u>Do not list simply "stocks and bonds" or "bank accounts."</u> For example, list "Stock (Williams Construction Co.)," "Bonds (Southern Water and Gas)," "Bank accounts (First National Bank)," "Smith family trust," "Promissory note and mortgage (owed by John and Jane Doe)."

How to Value Assets:

- Value each asset by its fair market value on the date used in Part A for your net worth.
- Jointly held assets: If you hold real or personal property jointly with another person, your interest equals your legal percentage of ownership in the property. <u>However</u>, assets that are held as tenants by the entirety or jointly with right of survivorship must be reported at 100% of their value.
- Partnerships: You are deemed to own an interest in a partnership which corresponds to your interest in the equity of that partnership.
- Trusts: You are deemed to own an interest in a trust which corresponds to your percentage interest in the trust corpus.
- Real property may be valued at its market value for tax purposes, unless a more accurate appraisal of its fair market value is available.
- Marketable securities which are widely traded and whose prices are generally available should be valued based upon the closing price on the valuation date.
- Accounts, notes, and loans receivable: Value at fair market value, which generally is the amount you reasonably expect to collect.

- Closely-held businesses: Use any method of valuation which in your judgment most closely approximates fair market value, such as book value, reproduction value, liquidation value, capitalized earnings value, capitalized cash flow value, or value established by "buy-out" agreements. It is suggested that the method of valuation chosen be indicated on the form.
- Life Insurance: Use cash surrender value less loans against the policy, plus accumulated dividends.
- The asset value of a leased vehicle is the vehicle's present value minus the lease residual (a number found on the lease document).

PART C— LIABILITIES

[Required by Art. II, s. 8, Fla. Const.; s. 112.312, F.S.]

LIABILITIES IN EXCESS OF \$1,000:

List the name and address of each creditor to whom you owed more than \$1,000 on the date you chose for your net worth in Part A, and list the amount you owed. Liabilities include: accounts, notes, and interest payable; debts or obligations (excluding taxes, unless the taxes have been reduced to a judgment) to governmental entities; judgments against you, and the unpaid portion of vehicle leases.

You are not required to disclose liabilities that are solely your spouse's responsibility.

You do not have to list on the form any of the following: credit card and retail installment accounts, taxes owed (unless the taxes have been reduced to a judgment), indebtedness on a life insurance policy owed to the company of issuance, or contingent liabilities. A "contingent liability" is one that will become an actual liability only when one or more future events occur or fail to occur, such as where you are liable only as a partner (without personal liability) for partnership debts, or where you are liable only as a guarantor, surety, or endorser on a promissory note. If you are a "co-maker" on a note and are jointly liable or jointly and severally liable, then it is not a contingent liability.

How to Determine the Amount of a Liability:

- Generally, the amount of the liability is the face amount of the debt.
- The amount of the liability of a vehicle lease is the sum of any past-due payments and all unpaid prospective lease payments.
- If you are the only person obligated to satisfy a liability, 100% of the liability should be listed.
- If you are jointly and severally liable with another person or entity, which often is the case where more than one person is liable on a promissory note, you should report here only the portion of the liability that corresponds to your percentage of liability. *However*, if you are jointly and severally liable for a debt relating to property you own with one or more others as tenants by the entirety or jointly, with right of survivorship, report 100% of the total amount owed.
- If you are only jointly (not jointly and severally) liable with another person or entity, your share of the liability should be determined in the same way as you determined your share of jointly held assets.

(CONTINUED on page 5)

Examples:

- You owe \$10,000 to a bank for student loans, \$5,000 for credit card debts, and \$60,000 with your spouse to a savings and loan for the mortgage on the home you own with your spouse. You must report the name and address of the bank (\$10,000 being the amount of that liability) and the name and address of the savings and loan (\$60,000 being the amount of this liability). The credit card debts need not be reported.
- You and your 50% business partner have a \$100,000 business loan from a bank and you both are jointly and severally liable. Report the name and address of the bank and \$50,000 as the amount of the liability. If your liability for the loan is only as a partner, without personal liability, then the loan would be a contingent liability.

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

List in this part of the form the amount of each debt for which you were jointly and severally liable, that is not reported in the "Liabilities in Excess of \$1,000" part of the form. Example: You and your 50% business partner have a \$100,000 business loan from a bank and you both are jointly and severally liable. Report the name and address of the bank and \$50,000 as the amount of the liability, as you reported the other 50% of the debt earlier.

PART D — INCOME

[Required by Art. II, s. 8, Fla. Const.]

As noted on the form, you have the option of either completing Part D of the form or attaching a copy of your complete 2016 federal income tax return, including all schedules, W2's and attachments, with Form 6, or. If you do not attach your tax return, you must complete Part D.

PRIMARY SOURCES OF INCOME:

List the name of each source of income that provided you with more than \$1,000 of income during 2016, the address of that source, and the amount of income received from that source. The income of your spouse need not be disclosed; however, if there is joint income to you and your spouse from property you own jointly (such as interest or dividends from a bank account or stocks), you should include all of that income.

"Income" means the same as "gross income" for federal income tax purposes, even if the income is not actually taxable, such as interest on tax-free bonds. Examples of income include: compensation for services, gross income from business, gains from property dealings, interest, rents, dividends, pensions, IRA distributions, distributive share of partnership gross income, and alimony, but not child support. Where income is derived from a business activity you should report the income to you, as calculated for income tax purposes, rather than the income to the business.

Examples:

- If you owned stock in and were employed by a corporation and received more than \$1,000 of income (salary, commissions, dividends, etc.) from the company, you should list the name of the company, its address, and the total amount of income received from it.
- If you were a partner in a law firm and your distributive share of partnership gross income exceeded \$1,000, you should list the name of the firm, its address, and the amount of your distributive share.

- If you received dividend or interest income from investments in stocks and bonds, list only each individual company from which you received more than \$1,000. Do not aggregate income from all of these investments.
- If more than \$1,000 of income was gained from the sale of property, then you should list as a source of income the name of the purchaser, the purchaser's address, and the amount of gain from the sale. If the purchaser's identity is unknown, such as where securities listed on an exchange are sold through a brokerage firm, the source of income should be listed simply as "sale of (name of company) stock," for example.
- If more than \$1,000 of your income was in the form of interest from one particular financial institution (aggregating interest from all CD's, accounts, etc., at that institution), list the name of the institution, its address, and the amount of income from that institution.

SECONDARY SOURCES OF INCOME:

This part is intended to require the disclosure of major customers, clients, and other sources of income to businesses in which you own an interest. It is not for reporting income from second jobs. That kind of income should be reported as a "Primary Source of Income." You will not have anything to report unless:

- (1) You owned (either directly or indirectly in the form of an equitable or beneficial interest) during the disclosure period, more than 5% of the total assets or capital stock of a business entity (a corporation, partnership, limited partnership, LLC, proprietorship, joint venture, trust, firm, etc., doing business in Florida); and
- (2) You received more than \$1,000 in gross income from that business entity during the period.

If your ownership and gross income exceeded the two thresholds listed above, then for that business entity you must list every source of income to the business entity which exceeded 10% of the business entity's gross income (computed on the basis of the business entity's most recently completed fiscal year), the source's address, the source's principal business activity, and the name of the business entity in which you owned an interest. You do not have to list the amount of income the business derived from that major source of income.

Examples:

- You are the sole proprietor of a dry cleaning business, from which you received more than \$1,000 in gross income last year. If only one customer, a uniform rental company, provided more than 10% of your dry cleaning business, you must list the name of your business, the name of the uniform rental company, its address, and its principal business activity (uniform rentals).
- You are a 20% partner in a partnership that owns a shopping mall and your gross partnership income exceeded \$1,000. You should list the name of the partnership, the name of each tenant of the mall that provided more than 10% of the partnership's gross income, and the tenant's address and principal business activity.

(CONTINUED on page 6)

PART E - INTERESTS IN SPECIFIED BUSINESSES

[Required by s. 112.3145, F.S.]

The types of businesses covered in this section include: state and federally chartered banks; state and federal savings and loan associations; cemetery companies; insurance companies; mortgage companies; credit unions; small loan companies; alcoholic beverage licensees; pari-mutuel wagering companies; utility companies; entities controlled by the Public Service Commission; and entities granted a franchise to operate by either a city or a county government.

You are required to make this disclosure if you own or owned (either directly or indirectly in the form of an equitable or beneficial interest) at any time during the disclosure period, more than 5% of the total assets or capital stock of one of the types of business entities listed above. You also must complete this part of the form for each of these types of businesses for which you are, or were at any time during 2016, an officer, director, partner, proprietor, or agent (other than a resident agent solely for service of process).

If you have or held such a position or ownership interest in one of these types of businesses, list: the name of the business, its address and principal business activity, and the position held with the business (if any). Also, if you own(ed) more than a 5% interest in the business, as described above, you must indicate that fact and describe the nature of your interest.

PART F - TRAINING CERTIFICATION

[Required by s. 112.3142, F.S.]

If you are a Constitutional or elected municipal officer whose service began before March 31 of the year for which you are filing, you are required to complete four hours of ethics training which addresses Article II, Section 8 of the Florida Constitution, the Code of Ethics for Public Officers and Employees, and the public records and open meetings laws of the state. You are required to certify on this form that you have taken such training.

(End of Instructions.)

OTHER FORMS YOU MAY NEED TO FILE IN ORDER TO COMPLY WITH THE ETHICS LAWS

In addition to filing Form 6, you *may* be required to file one or more of the special purpose forms listed below, depending on your particular position, business activities, or interests. As it is your duty to obtain and file any of the special purpose forms which may be applicable to you, you should carefully read the brief description of each form to determine whether it applies.

Form 6F — Final Full and Public Disclosure of Financial

Interests: Required of elected constitutional officers and others who must file financial disclosure using Form 6; to be filed within 60 days after leaving office or employment. This form is used to report financial interests between January 1st of the last year of office or employment and the last day of office or employment. [s. 112.3144, F.S.]

Form 6X — Amended Full and Public Disclosure of Financial Interests: To be used by elected constitutional officers and others who must file financial disclosure using Form 6 or 6F to correct mistakes on previously filed form. [s. 112.3144, F.S.]

Form 2 — Quarterly Client Disclosure: Required of elected constitutional officers, local officers, state officers, and specified state employees to disclose the names of clients represented for compensation by themselves, or a partner or associate before agencies at the same level of government as they serve. The form should be filed by the end of the calendar quarter (March 31, June 30, Sept. 30, Dec. 31) following the calendar quarter in which a reportable representation was made. [s. 112.3145, F.S.]

Form 9 — Quarterly Gift Disclosure: Required of elected constitutional officers and others who must file financial disclosure using Form 1 or 6 (as well as State procurement employees) to report gifts worth more than \$100. The form should be filed by the end of the calendar quarter (March 31, June 30, September 30, or December 31) following the calendar quarter in which the gift was received. [s. 112.3148, F.S.]

Form 3A — Statement of Interest in Competitive Bid for Public Business

Form 4A — Disclosure of Business Transaction, Relationship, or Interest

Form 8A — Memorandum of Voting Conflict for State Officers

Form 8B — Memorandum of Voting Conflict for County, Municipal, and Other Local Public Officers

Form 10 — Annual Disclosure of Gifts from Governmental Entities and Direct Support Organizations and Honorarium Event Related Expenses

WHO MUST FILE FORM 6:

Copies of these forms are available from the Supervisor of Elections in your county; from the Commission on Ethics, Post Office Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303; telephone (850) 488-7864; and at the Commission's website: www.ethics.state.fl.us.

Questions about any of these forms or the ethics laws may be addressed to the Commission on Ethics, Post Office Drawer 15709, Tallahassee, Florida 32317-5709; physical address: 325 John Knox Road, Building E, Suite 200, Tallahassee, FL 32303; telephone (850) 488-7864.