

OF FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:
 Adams Scott Allen

MAILING ADDRESS:
 9501 S Istachatta Road

CITY : ZIP : COUNTY :
 Floral City 34436 Citrus

NAME OF AGENCY :
 Elected Constitutional Officer

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
 Citrus County Supervisor of Elections

CHECK IF THIS IS A FILING BY A CANDIDATE

2020 JUN 9 AM 7:32

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2019 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of May 27, 20 20 was \$ 26,835,000.00.

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

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 effects (described above) is \$ 475,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
9501/9105 S Istachatta Rd, Floral City, FL & Inverness (1,000+/- ranches & homes)	10,000,000
US Treasury notes and bonds	3,800,000
Scott Adams Construction, Inc, 9501 S Istachatta Rd, Floral City	1,500,000
Moon Lake Investments, Inc, 9501 S Istachatta Rd, Floral City	2,000,000

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
N/A	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
N/A	

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 2019 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 2019 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Interest on US treasury notes		100,000
Scott Adams Construction, Inc.	9501 S Istachatta Rd, Floral City, FL 34436	100,000 +

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	Scott Adams Construction In	Scott & Pam Adams Farms	Moon Lake Investments Inc
ADDRESS OF BUSINESS ENTITY	9501 S Istachatta Rd Floral City, FL 34436	9501 S. Istachatta Rd Floral City, FL 34436	9501 S. Istachatta Rd. Floral City, FL 34436
PRINCIPAL BUSINESS ACTIVITY	construction	agriculture	investment
POSITION HELD WITH ENTITY	president	owner	president
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	yes	yes	yes
NATURE OF MY OWNERSHIP INTEREST	corporation	sole proprietor	corporation

PART F - TRAINING

For officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

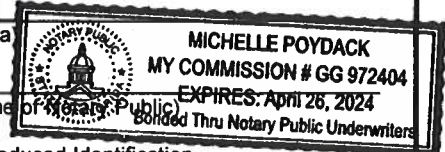
OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA
 COUNTY OF Citrus
 Sworn to (or affirmed) and subscribed before me by means of
 physical presence or online notarization, this 27 day of

May, 2020 by Scott Adams

Michelle Poynack
 (Signature of Notary Public--State of Florida)



(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known X OR Produced Identification _____

Type of Identification Produced _____

Scott Adams
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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 statement:

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

Part B – Assets:

Scott & Pam Adams Farms – Floral City, FL	\$2,000,000
3-Corp Management, Inc. – Ocala, FL	\$1,000,000
Adams Rocky Creek Ranch, LLC - Floral City, FL	\$1,000,000
Adams Rocky Creek Investments, LLC – Floral City, FL	\$1,000,000
Adams North Florida Ranch, LLC – Floral City, FL	\$1,000,000
Adams North Florida Investments, LLC – Floral City, FL	\$1,000,000
Adams Moon Lake Ranch, LLC - Floral City, FL	\$1,000,000
Adams Moon Lake Investments, LLC - Floral City, FL	\$1,000,000
Commercial Properties – Citrus County, FL	\$1,000,000
Nguyen Fitchett – Inverness, FL	\$ 60,000

Part D – Income:

Miscellaneous Income:	\$100,000
Nguyen Fitchett-promissory note	\$ 6,400/yearly