

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

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

2016 JUN -6 PM 12:10

SUPERVISOR OF ELECTIONS
HERNANDO COUNTY, FL

LAST NAME — FIRST NAME — MIDDLE NAME:

Champion - Steven - Douglas II

MAILING ADDRESS:

15678 Oakcrest Circle

CITY:

Brooksville

ZIP:

34604

COUNTY:

Hernando

NAME OF AGENCY:

Hernando County Commissioner

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Hernando County Commissioner District 5

CHECK IF THIS IS A FILING BY A CANDIDATE

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2015 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 June, 20 16 was \$ 1,159,510

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 \$ 186,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
735 Champion Dr Brooksville Fl 34601 Rental House	\$45,000
1040 Marlow Ave Spring Hill 34606 House	\$50,000
15678 Oakcrest Circle Brooksville Florida 34604 Primary House	\$420,000
Orlando Ave Brooksville Fl 34604 Empty Lot	\$3810

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Ditech Mortgage PO box 94710 Palatine IL 60094 - 15678 Oakcrest Circle Primary house Mortgage	\$171,000
Select Portfolio Servicing PO box 65440 Salt Lake City UT 84165 - 3271 Overlook Rd House Mortgage	\$421,000
Bank of American PO box 105576 Atlanta GA - 2nd Mortgage 3271 Overlook rd House	\$48,000
Bank of America PO box 105576 Atlanta GA - total 2 Mortgages 1208 N 57 ave triplex	\$293,000

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 2015 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 2015 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2015 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
American Gun & Pawn Inc.	1118 E Jefferson St. Brooksville FL 34601	\$19,200
Rental Income Investment Properties	15678 Oakcrest Circle Brooksville FL 34604	\$88,155

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			
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			

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 Hernando

Sworn to (or affirmed) and subscribed before me this 6 day of

 June , 20 16 by Steven Champ

 Julie A. Hansen
 (Signature of Notary Public--State of Florida)

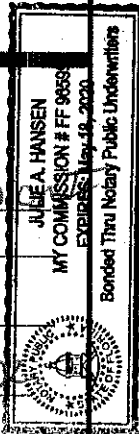
Julie A. Hansen

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

Personally Known _____ OR Produced Identification FL ID

Type of Identification Produced FL ID

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]
 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 Continued:

Description of asset	Value
Cecila Ave Brooksville Empty Lot	\$3,000
3271 Overlook Rd Davie Fl Rental House	\$500,000
1208 N 57 ave Hollywood FL Rental Triplex	\$300,000
4 prepaid College plans for kids	\$57,000
Cash on hand	\$20,000
Bank of America bank account	\$22,700
Alliant Credit Union bank account	\$21,800
Discover bank account	\$5200
Brannan Bank account	\$87,000
Stock held with fidelity investments	\$15,000
Pension balance Target Corp	\$67,000
Stock Held in American Gun & Pawn C Corporation	\$475,000