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SUPERVISOR OF ELECTIONS
HERNANDO COUNTY, FL

Hernando County-Elected Constitutional Officer



*****AUTO**MIXED AADC 323 T5 P1 283 1089

ALVIN DALE NIENHUIS, SHERIFF
PO BOX 10375
BROOKSVILLE FL 34603-0375

ID CODE



ID NO.

234846

CONF. CODE

Nienhuis, Alvin Dale

CHECK IF THIS IS A FILING BY A CANDIDATE *AND INCUMBENT*

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 December 31st, 20 19 was \$ \$1,288,030.72.

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 \$ See attached spreadsheet

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See attached spreadsheet	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See attached spreadsheet	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See attached spreadsheet	

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
Hernando County Sheriff's Office (W-2, Box 1)	P.O. Box 10070, Brooksville FL 34603	\$ 142,472.06
Net Rental Income (Schedule E)		\$773.00

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
N/A			

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

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
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

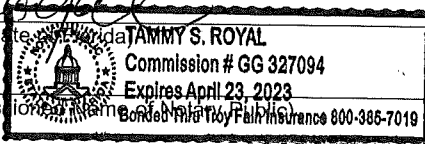
I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA
 COUNTY OF Hernando

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 4th day of

June, 2020 by _____

Tammy Royal
 (Signature of Notary Public--State of Florida)



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

Personally Known OR Produced Identification _____

Type of Identification Produced _____

Chris ...
 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

Nienhuis, Alvin D.
 Sheriff
 Hernando County Sheriff's Office
 Addendum to Form 6 - 2019 Page 1 of 2

PART B -- ASSETS	
Household Assets (items under \$1000) - Approx. (Calculated using homeowner's insurance estimate of household contents + 2nd Residence)	\$98,883.00
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:	
DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
2012 Toyota Yaris (Joint with daughter)	\$5,000.00
2006 Trail Cruiser By Trail-lite (RV Trailer) (approximate value)	\$2,500.00
2012 Chevrolet Tahoe (approximate value)	\$12,000.00
Mort. Note - 4427 57th Ave. No. St. Petersburg, FL (Sold House, holding note)	\$82,450.00
House - 8341 43rd St. No. Pinellas Park, FL (Property Appraiser's Fair Market Value)	\$156,900.00
House - 9530 49th Way. No. Pinellas Park, FL (Property Appraiser's Fair Market Value)	\$88,621.00
House - 8125 Glenbrooke Pl Sarasota, FL (Property Appraiser's Fair Market Value)	\$197,821.00
House - Personal Residence., Brooksville, FL (Property Appraiser's Fair Market Value)	\$210,478.00
House - Personal 2nd Res, Weeki Wachee, FL (Property Appraiser's Fair Market Value)	\$195,817.00
Hartford Deferred Comp - General Account	\$56,836.05
Suntrust Checking (Household) (bank balance)	\$967.52
Suntrust Checking (Rental)(bank balance)	\$2,005.45
Suntrust Savings	\$1,978.08
US Savings Bonds (approx value)	\$7,138.38
FRS DROP Account	\$500,329.08
PART C -- LIABILITIES	
LIABILITIES IN EXCESS OF \$1,000:	
NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Suntrust Bank 1 East Jefferson St., Brooksville, FL 34614 (8125 Glenbrooke Pl)	\$168,086.27
Suntrust Bank 1 East Jefferson St., Brooksville, FL 34614 (Primary Residence)	\$90,935.71
Discover P.O. Box 30943 Salt Lake City, UT 84130-0943	\$1,186.31
Capital One PO Box 30285 Salt Lake City, UT 84130-0287	\$2,582.98
Suntrust Bank 1 East Jefferson St., Brooksville, FL 34614 (Home Equity Line Prim Res)	\$68,902.57

Net worth \$1,288,030.72