2021 Form 6 - Full and Public Disclosure of Financial Interests

₩ E C E I V E D Filed with COE: 05/28/2022

General Information

2022 JUN 13 PH 12: 44

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CAPERYISOR OF ELECTION HERMANDO COUNTY, FL

CONFIDENTIAL

Name:

Mr Mark C Johnson

Address: County:

Но

Hernando

AGENCY INFORMATION

Organization

Suborganization

Title

Hernando County

Planning & Zoning Commission

Alternate 1

CANDIDATE FOR

Position

Agency Name

Position sought or held

District School Board

Hernando County School Board

District One

Net Worth

My Net Worth as of <u>December 31, 2021</u> was \$ 131,706.00.

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Assets

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HERVISOR OF ELECTIONS

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 \$ 8,750.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

| Description of Asset | Value of Asset |
|----------------------|----------------|
| Bank Accounts | \$ 29,491.00 |
| Investment Accounts | \$ 38,489.00 |
| Retirement Savings | \$ 60,971.00 |
| Vehicles | \$ 63,500.00 |

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------------|---|---------------------|
| Vehicle Loan | SunTrust Bank; PO Box 791144; Baltimore MD 21279-1144 | \$ 25,000.00 |
| Credit Card - PNC | PNC Banking; PO Box 2210; Pittsburgh PA | \$ 17,783.00 |
| PayPal Credit Services | PO Box 960080; Orlando, FL 32896-0080 | \$ 8,462.00 |
| Vehicle | SETF; PO Box 580048; Charlotte NC 28258-0048 | \$ 9,500.00 |

JOINT AND SEVERAL LIABILITEIS NOT REPORTED ABOVE:

| Name of Creditor | Address of Creditor Amount of Liability | WW. |
|------------------|---|-----|
| N/A | | |

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Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

| Name of Source of Income Exceeding \$1,000 | Address of Source of Income | Amount |
|--|-----------------------------|--------------|
| Social Security | SSA.gov | \$ 16,056.00 |

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

| Business Entity | Major Sources of Business Income | DAAArece | Principal Business Activity of Source |
|------------------------------------|-------------------------------------|--|--|
| Avery Agency Private Investigation | | Quailwood Lane; Spring Hill, FL 34606 | Private Investigation |

Interests in Specified Businesses

Business Entity #1

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

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CPA/Attorney Signature Only

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I, Mr Greg K Myers 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.

Greg K Myers

Digitally signed: 05/28/2022

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.

Mark C Johnson

Digitally signed: 05/26/2022

Filed with COE: 05/28/2022