

CANDIDATE OATH

SCHOOL BOARD NONPARTISAN OFFICE

Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

*22JUN13PM0405 SDE Lee Co FL

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a) and 105.031, Florida Statutes)

I, Dan Severson,

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box ☐ (see page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of Lee County School Board, 4,
(Office) (District #)

, ; I am a qualified elector of Lee County, Florida;
(Circuit #) (Group or Seat #)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Section 876.05, Florida Statutes, oath (only applicable if elected and when term of office begins): I, a citizen of the State of Florida and of the United States of America, and being employed by or an officer of the school board and a recipient of public funds as such employee or officer, do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

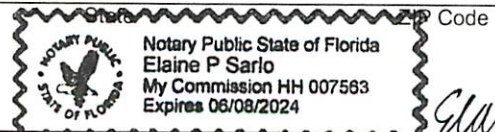
Candidate's Florida Voter Registration Number (located on your voter information card): 122854516

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]

X Dan Severson (239)910-4536 Doc@danseverson.org
Signature of Candidate Telephone Number Email Address
2225 SE 15th St Cape Coral FL 33990
Address City State Code

STATE OF FLORIDA

COUNTY OF Lee



Signature of Notary Public

Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of
online notarization ☐ OR physical presence ☒
this 7th day of June, 2022.

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: _____

FORM 6

FULL AND PUBLIC DISCLOSURE

2021

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

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:

SEVERSON DANIEL MARK

MAILING ADDRESS:

2225 SE 15TH ST

CITY:

CAPE CORAL

ZIP:

33910

COUNTY:

LEE

NAME OF AGENCY:

LEE COUNTY SCHOOL DISTRICT

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

LEE COUNTY SCHOOL BOARD DIST 4

CHECK IF THIS IS A FILING BY A CANDIDATE



2021 JUN 13 PM 04:05 SDE

ee Co F

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2021 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 7, 2022 was \$ 907,637.

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 \$ 57,300

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)

VALUE OF ASSET

HOME: 2225 SE 15TH ST, CAPE CORAL, FL

835,800

SAILBOAT: 1974 MORGAN OUT ISLAND KETCH

58,000

PONTON: 21' SNUTRACKER

6,000

BANK ACCOUNT AND INVESTMENTS

SEE ATTACH A

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

LOAN: TRUIST BANK - 2420 VANDERBILT BEACH RD, NAPLES, FL

110,080.00

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 2021 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 2021 federal income tax return and all W2's, schedules, and attachments.
[If you check this box and attach a copy of your 2020 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
Military Retire Pay DFAS	8899 E 56 th ST INDIANAPOLIS, IN	53582.00

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

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

This section applies only to officers required to complete annual ethics training pursuant to section 112.3142, F.S. [See instructions p. 6]

☐ 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.



SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA

COUNTY OF Lee

Sworn to (or affirmed) and subscribed before me by means of

☒ physical presence or ☐ online notarization, this 15th day of

June, 20 22 by Dan Severson

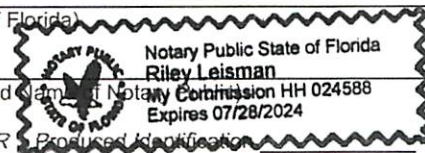
Riley Leisman
(Signature of Notary Public--State of Florida)

(Print, Type, or Stamp Commissioned Notary Public, State of Florida)

Personally Known ☒

OR ☐ Produced Identification

Type of 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 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 ☒

Attachment A

TRUIST BANK ACCOUNT

SAVINGS	4200.67
CHECKING	6189.55

Investments

Etrade stocks

IRA 0559	SHARES	VALUE
EXACT SCIENCES	70	3367
<u>CASH RESERVE</u>		<u>208</u>
TOTAL VALUE		3575

IRA 0699	SHARES	VALUE
EXACT SCIENCES	256	12313
SANDRIDGE ENERGY	200	5672
<u>CASH RESERVE</u>		<u>31375</u>
TOTAL VALUE		49,360

ROBINHOOD STOCK	SHARES	VALUE
ADVANCED MICR DESIGNS	10	1047
<u>CASH RESERVE</u>		<u>935</u>
TOTAL VALUE		1982

SELIN BIO CHEMICAL STOCK	4000	4000.00
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ITEMS LESS THAN \$1000;

Honda outboard- \$800, Tohatsu Outboard- \$500, Dinghy-\$400

Total less than \$1000 value	\$1700.00
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