FORM 6	FULL AND PUBLIC DISCL	OSURE	2019	
	OF FINANCIAL INTERESTS		FOR OFFICE USE ONLY:	
Manatee County-Elected Constitutional Officer			28828 Charles Edward	
GRECK I TRIBITO AT ILLINO DIT			A STATE OF THE STA	
culated by subtracting your	PART A NET WORTH our net worth as of December 31, 2019 or a more reported liabilities from your reported assets, so December 31 , 2019 was \$ 2	please see the in	Note: Net worth is not cal- structions on page 3.]	
The Part of the Pa	PART B ASSETS			
following, if not held for investre furnishings; clothing; other house		umismatic items; art or leased.	. This category includes any of the objects; household equipment and	
ASSETS INDIVIDUALLY VALUED				
DESCRIPTION C	VALUE OF ASSET			
Vini Warehouse - 7000 Iris Stree	1,104,000			
Residence - 4617 7th Street Ct. E	520,000			
	via, Wells Fargo		60,251	
Bank Accounts - M & I, Wacho Deferred Compensation - Empo	wer			
Bank Accounts - M & I, Wachon Deferred Compensation - Emporation - Emp	wer	* *************************************	60,251	
Bank Accounts - M & I, Wachon Deferred Compensation - Emporation - Emporation Financial Group / VANG	UARD PART C LIABILITIES 00 (See Instructions on page 4):		60,251 660,529 344,759	
Bank Accounts - M & I, Wachon Deferred Compensation - Emporation - Emporation Financial Group / VANG	UARD PART C LIABILITIES (See Instructions on page 4): PRESS OF CREDITOR	Z KUNKULA KANDA	60,251	
Bank Accounts - M & I, Wachound Deferred Compensation - Emporation - Emporation Financial Group / VANG LIABILITIES IN EXCESS OF \$1,00 NAME AND ADD	UARD PART C LIABILITIES (See Instructions on page 4): PRESS OF CREDITOR	7 10 22 20 10 10 10 10 10 10 10 10 10 10 10 10 10	60,251 660,529 344,759 AMOUNT OF LIABILITY	
Bank Accounts - M & I, Wachound Deferred Compensation - Emporation - Emporation Financial Group / VANG LIABILITIES IN EXCESS OF \$1,00 NAME AND ADD	UARD PART C LIABILITIES (See Instructions on page 4): PRESS OF CREDITOR		60,251 660,529 344,759 AMOUNT OF LIABILITY	
Bank Accounts - M & I, Wachound Deferred Compensation - Emporation - Emporation Financial Group / VANG LIABILITIES IN EXCESS OF \$1,00 NAME AND ADD	UARD PART C LIABILITIES (See Instructions on page 4): PRESS OF CREDITOR	VC NA COLOR	60,251 660,529 344,759 AMOUNT OF LIABILITY	

		PART D -	- INCOME		
Identify each separate source a copy of your 2019 federal inco attaching your returns, as the I	me tax return, including all W:	2s, schedules, a	and attachments. Please redact any	y sources of income. Or attach a complete social security or account numbers before	
I elect to file a copy of [If you check this box a	my 2019 federal income tax re and attach a copy of your 2019	eturn and all Wi 3 tax return, you	2's, schedules, and attachments. I need not complete the remainder o	f Part D.]	
PRIMARY SOURCES OF INC		age 5):			
NAME OF SOURCE OF INCOME EXCEEDING \$1,000		015 4th Av	ADDRESS OF SOURCE OF INCO e W., Bradenton, Florida	ME AMOUNT 150,034	
The state of the s				96,419	
Hackney Storage Spaces 7000					
			usinesses owned by reporting person	nsee instructions on page 5]; PRINCIPAL BUSINESS	
NAME OF BUSINESS ENTITY	NAME OF MAJO OF BUSINESS		ADDRESS OF SOURCE	ACTIVITY OF SOURCE	
and the state of t	I In while the Land a language particular particular for			rener i en relegiorismo de la company de	
			D BUSINESSES [Instructions	•	
	BUSINESS ENTITY		BUSINESS ENTITY # 2	BUSINESS ENTITY # 3	
NAME OF BUSINESS ENTITY	Hackney Storage Spaces				
ADDRESS OF BUSINESS ENTITY	7000 Iris St., Sarasota Fl	orida			
PRINCIPAL BUSINESS ACTIVITY	Mini - Warehouse				
POSITION HELD WITH ENTITY	Sole Proprietor		1999		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	ļ				
NATURE OF MY OWNERSHIP INTEREST	Sole Proprietor		and the state of t		
	o'As Aguar Had Taran San San G		TRAINING	3/0 4614	
For offic	ers required to complet	•	nics training pursuant to secti	ion 112.3142, F.S.	
	I CERTIFY THAT I I	HAVE COM	IPLETED THE REQUIRE	D TRAINING.	
OATH			E OF FLORIDA		
			COUNTY OF Manatee Sworn to (or affirmed) and subscribed before me by means of		
			physical presence or online notarization, this 1st day of		
and say that the information disclosed on this form June , 2020 by Charles E. Hackney ,					
and any attachments hereto is true, accurate,		10	Barbara P Richardon		
and complete.		(Sign	(Signature of Notary PublicState of Signature of Notary Public		
~ 01			Barbara R. Richardson Barbara R. Richardson MY COMMISSION # GG 040841		
1.100 1.100			77	October 20, 2020 Society Bonded Tinu Notary Public Underwriters	
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE			onally Known O	Application (Hamiltonia)	
		Туре	of Identification Produced	to a control of the c	
If a certified public accounta		473, or attorne		da Bar prepared this form for you, he or	
		, prepare	d the CE Form 6 in accordance w	rith Art. II, Sec. 8, Florida Constitution,	
Section 112.3144, Florida S and correct.	tatutes, and the instruction	s to the form.	Upon my reasonable knowledge a	and belief, the disclosure herein is true	
Signal	ure			Date	
		does not re	lieve the filer of the responsi	bility to sign the form under oath.	
Detroite P. P. F.	ALLON AND THE THE PROPERTY OF	T THE PART OF THE	D ON A SEPARATE SHEET,		