

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

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

CENTER, DANIEL, J.

MAILING ADDRESS :

3234 58 TER. E.

CITY: BRADENTON ZIP: 34203 COUNTY: MANATEE

NAME OF AGENCY: SOUTHERN MANATEE FIRE + RESCUE DIST

NAME OF OFFICE OR POSITION HELD OR SOUGHT: BOARD OF COMMISSIONERS SEAT 2

CHECK ONLY IF  CANDIDATE OR  NEW EMPLOYEE OR APPOINTEE

RECEIVED  
 2020 JUN -8 PM 3 49  
 MANATEE COUNTY  
 SUPERVISOR OF ELECTIONS

\*\*\*\* THIS SECTION MUST BE COMPLETED \*\*\*\*

**DISCLOSURE PERIOD:**

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019.

**MANNER OF CALCULATING REPORTABLE INTERESTS:**

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR  DOLLAR VALUE THRESHOLDS

**PART A -- PRIMARY SOURCES OF INCOME** [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
FRS	TALLAHASSEE	RETIREMENT FUND

**PART B -- SECONDARY SOURCES OF INCOME** [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
NA			

**PART C -- REAL PROPERTY** [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a")

NA

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

**FILING INSTRUCTIONS** for when and where to file this form are located at the bottom of page 2.

**INSTRUCTIONS** on who must file this form and how to fill it out begin on page 3.