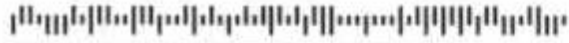


RECEIVED FOR USE ONLY:

Pasco County School District-Elected Constitutional Officer

2020 JUN 10 PM 4: 58

BRIAN E. CURLEY
SUPERVISOR OF ELECTIONS
LAND O' LAKES, FLORIDA



*****A/TU**PKED AADC 173 75 P1 294 1180

COLLEEN R. BEAUDOIN, SCHOOL BOARD CHAIRMAN
21223 SKY VISTA DR
LAND O LAKES FL 34637-7460 District 2

ID CODE



ID NO.

268044

CONF. CODE

Beaudoin, Colleen R.

CHECK IF THIS IS A FILING BY A CANDIDATE

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 May 27, 20 20 was \$ 1,253,507.-

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 \$ 175,000.-

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

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

VALUE OF ASSET

| DESCRIPTION OF ASSET (specific description is required - see instructions p.4) | VALUE OF ASSET |
|--|----------------|
| 21223 Sky Vista Dr., Land O'Lakes FL 34637 (Home) | 615,186.- |
| 401K - TIAA - CREF | 96,370.59 |
| Bank Account (Bank of America) | 2,677.23 |
| Bank Account (Suncoast Federal Credit Union) | 4,004.11 |

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

| NAME AND ADDRESS OF CREDITOR | AMOUNT OF LIABILITY |
|--|---------------------|
| Suncoast Schools Fed. Cr. Union P.O. Box 11904, Tampa, FL 33680 (Car loan) | 34,367.03 |
| Flag Star Bank P.O. Box 371891, Pittsburgh, PA 15250 (mortgage) | 288,125.35 |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR

AMOUNT OF LIABILITY

N/A

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 |
|--|--|-----------|
| The University of Tampa | 401 W. Kennedy Blvd, Tampa, FL 33606 | 69,566.20 |
| District School Board of Pasco County | 7227 Lord O'Lakes Blvd, Lord O'Lakes, FL 34638 | 40,442.14 |

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 | N/A | 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 112.314...

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.

Coleen R. Beaudoin
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
 COUNTY OF Pasco
 Sworn to (or affirmed) and subscribed before me by means of
 physical presence or online notarization, this 10 day of
JUNE, 2020 by COLEEN BEAUDOIN
Karen Estel
 (Signature of Notary Public--State of Florida)
 Notary Public State of Florida
 Karen M Estel
 My Commission GG 220482
 Expires 05/21/2022
 (Print, Type, or Stamp Commissioner Name of Notary Public)
 Personally Known _____ OR Produced Identification
 Type of Identification Produced FLDL

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

Part B continued

Money Market Bank Account (Suncoast Schools Credit Union)
\$ 23,392.82

CD (Suncoast Credit Union) \$ 15,077.86

Managed Account (Orion Portfolio Solutions) \$ 585,887.-

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BRIAN E. CURLEY
SUPERVISOR OF ELECTIONS
LAND O LAKES, FLORIDA