

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 02/02/2024

**General Information**

Name: Mr James Shive  
Address: 37750 SOUTHVIEW AVE, DADE CITY, FL 33525 **PID 209587**  
County: Pasco

**AGENCY INFORMATION**

Organization	Suborganization	Title
Dade City	Mayor & City Commission	Mayor

**CANDIDATE FOR**

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board	City of Dade City	City Commissioner Group 3

**Net Worth**

My Net Worth as of December 31, 2023 was \$ 445,523.00.

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**Assets**

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 \$ 14,600.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Residence 37750 Southview Ave Dade City Fl	\$ 375,000.00
Condo 13547 Embassy Park Ct, Dade City FL 33525	\$ 175,000.00
SACFCU Checking 12542 Curley Street, San Antonio, FL	\$ 2,345.00
SACFCU Saving 12542 Curley Street, San Antonio, FL	\$ 2,013.00
SACFCU Saving 12542 Curley Street, San Antonio, FL	\$ 6,784.00

**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
SACFCU Credit Union	12542 Curley Street, San Antonio FL 33576	\$ 24,777.00
SACFCU Credit Union	12542 Curley Street, San Antonio FL 33576	\$ 6,082.00
SACFCU Credit Union	12542 Curley Street, San Antonio FL 33576	\$ 61,489.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

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**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 2022 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 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Florida Retirement System	PO Box 9000 Tallahassee FL 32315	\$ 30,459.00
Social Security	PO Box 67620 Wilkes-Barre, PA 18767	\$ 22,703.00
City of Dade City	38020 Merridian Ave, Dade City, FL 33525	\$ 5,400.00

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

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

**Interests in Specified Businesses**

<b>Business Entity # 1</b>
N/A

**Training**

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- I certify that I have completed the required training under Section 112.3142, F.S.
- Required training under Section 112.3142, F.S., not applicable to filer for this form year.

**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.

***James Shive***

Digitally signed: 02/02/2024

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