

OF FINANCIAL INTERESTS RECEIVED

FOR OFFICE USE ONLY:

\*\*\*\*\*AUTO\*\*MIXED AADC 323 T7 P1 110 1150

Cynthia Armstrong
School Board Chairman
Pasco County School District 3
Elected Constitutional Officer
9251 Alcott Way
Trinity, FL 34655-4600

18 JUN 18 PM 12:04

BRIAN E CORLEY
SUPERVISOR OF ELECTIONS
NEW PORT RICHEY, FLORIDA



ID Code
ID No. 233287

Conf. Code
Armstrong, Cynthia



CHECK IF THIS IS A FILING BY A CANDIDATE [X]

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2017 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 Dec. 31, 2017 was \$ 454,207

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 \$ 61,500

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Table with 2 columns: DESCRIPTION OF ASSET (specific description is required - see instructions p.4) and VALUE OF ASSET. Row 1: see attached

PART C -- LIABILITIES

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

Table with 2 columns: NAME AND ADDRESS OF CREDITOR and AMOUNT OF LIABILITY. Row 1: see attached

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Table with 2 columns: NAME AND ADDRESS OF CREDITOR and AMOUNT OF LIABILITY. Row 1: 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 2017 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 2017 federal income tax return and all W2's, schedules, and attachments.  
 [If you check this box and attach a copy of your 2017 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
Cynthia A Armstrong, PA	6330 US Hwy 19, New Port Richey FL 34652	39000
Dist. School Bld of Pasco County	7227 Hand o Lakes Blvd hand o lakes, FL 34638	28,723

**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		
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 112.3142, F.S.

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.

STATE OF FLORIDA  
 COUNTY OF PASCO  
 Sworn to (or affirmed) and subscribed before me this 30<sup>th</sup> day of May, 2018 by Cynthia Armstrong  
Kelly Marie Parker-Powell  
 (Signature of Notary Public—State of Florida)

Cynthia Armstrong  
 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

(Print, Type, or Stamp Commission Name of Notary Public Kelly Marie Parker Powell  
 My Commission GG 199942  
 Expiration Date 03/25/2022  
 Personally Known  Or   
 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

Cynthia Armstrong  
School Board Member

Pasco County School District

Elected Constitutional Office

9251 Alcott Way

Trinity, FL 34655

RECEIVED  
18 JUN 18 PM 12:04  
BRIAN E CORLEY  
SUPERVISOR OF ELECTIONS  
NEW PORT RICHEY, FLORIDA

Part B – Assets

Bank Accounts (Regions Checking, Money Market and Savings)	31,957
9251 Alcott Way, Trinity, FL 34655	285,000
IRA Money Market	29,000
Business – Coldwell Banker F.I. Grey & Son Residential, Inc.	225,000
18850 Green Park Rd, Hudson, FL – vacant lot	20,000

Part C – Liabilities

Mr. Cooper PO Box 60515, City of Industry, CA 11716	115,800
TD Bank Box 1377, Lewiston, MA 04243	106,500
Hyundai Finance P.O. Box 20029, Fountain Valley, CA 92728	13,800
Hyundai Finance P.O. Box 20029, Fountain Valley, CA 92728	13,200