FORM 6	FULL AND PUBLIC DISCLOSURE	2019	
Please print or type your name, mailing address, agency name, and position below:	OF FINANCIAL INTERESTS FOR	OFFICE USE ONLY:	
LAST NAME - FIRST NAME - MIDD	LE NAME: CRES JUN 8 PM 12	£ 66	
Nurse, Ka	d, Joseph SUPERVISOR OF ELEC	CTIONS	
MAILING ADDRESS: 176 - 215 AV	ELECTION SERVICE C	ENTER	
116 012 11			
St. Petersburg	295705 Pinellas		
NAME OF AGENCY: Proclas Counts	School Board		
NAME OF OFFICE OR POSITION HELD PINCIPAL COURT	or sought: - Y School Board, Dist 7		
CHECK IF THIS IS A FILING BY A CAN			
	PART A NET WORTH		
Please enter the value of your ne	et worth as of December 31, 2019 or a more current date. [Note: I	Not worth is not cal	
	rted liabilities from your reported assets, so please see the instructi		
	Mouy 15 , 20 20 was \$ 5,532,090	, ,	
Wy net worth as of	, 20 <u>20</u> was a <u>27331,170</u>	·	
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			
	goods and personal effects (described above) is \$		
ASSETS INDIVIDUALLY VALUED AT O	VER \$1,000:		
DESCRIPTION OF AS	SET (specific description is required - see instructions p.4)	VALUE OF ASSET	
see Attache	.1	<i>i</i>	
		5,689,090	
	PART C LIABILITIES		
LIABILITIES IN EXCESS OF \$1,000 (See	e instructions on page 4):		
NAME AND ADDRESS	222.200	AMOUNT OF LIABILITY	
	a (Loca - Daughters have) -+ potendar + 3370		
	158 Beach Dr. St. Petersburg, AL. 325701	74,000	
6M France 30	of Cherry St., Suite 3500 Ft. Worth, TX 76102	10,400	
JOINT AND SEVERAL LIABILITIES NOT	DEBORTED ADOME.		
NAME AND ADDRESS	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 INCO		age 5):	ADDDESS OF SOURCE OF WASh	_		
NAME OF SOURCE OF INC	. \		ADDRESS OF SOURCE OF INCOM	<u> </u>	AMOUN	
see ma	ched				232,80	0
	——————————————————————————————————————				<u> </u>	
			usinesses owned by reporting person-	-see instructio	ns on page 5]:	
NAME OF BUSINESS ENTITY	NAME OF MAJOR		ADDRESS OF SOURCE		PRINCIPAL BUSINE ACTIVITY OF SOUR	
AM					· · · · · ·	
р	ADT F INTEDESTS I	N SPECIFIE	D BUSINESSES [Instructions on	nogo G	enso	
	BUSINESS ENTITY		BUSINESS ENTITY # 2		IESS ENTITY	
NAME OF BUSINESS ENTITY					## <b>1</b>	20
ADDRESS OF	11/6			<del> </del>	200	<del>M</del>
BUSINESS ENTITY PRINCIPAL BUSINESS	NA			+	SS 1	m
ACTIVITY POSITION HELD				1	<u> </u>	=
WITH ENTITY				ļ		m
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS						0
NATURE OF MY OWNERSHIP INTEREST					E X	
		PART F - 7	FRAINING			
For officer	rs required to complete		cs training pursuant to section	112.3142.	F.S.	
			PLETED THE REQUIRED			
0.4	TH	STATE	OF FLORIDA			
		COUNT	1 11 11 11 11 11 11 11 11 11 11 11 11 1			
I, the person whose name appe beginning of this form, do depor			to (or affirmed) and subscribed before sical presence or 🔲 online notarizati			
and say that the information dis		M		a. 1 . 1.	duy 0;	
and any attachments hereto is		<u> </u>	2020 by K	avi N	urse	<u> </u>
and complete.  (Signature of Notary Public—State of Florida A Notary Public - State of		orida				
		Wes	Adu Griva-es	(重 <i>)</i> a C	ommission # GG 27998 omm. Expires Jan 26,	88
V ()		(Print, T	ype, or Stamp Commissioned Name			
SIGNATURE OF REPORTING	OFFICIAL OR CANDIDATE	Persona	aily Known OR Prod	uced Identifica	ation	
	OF HOME OR CARBIDATE		Identification Produced	DL		
If a certified public accountant	licensed under Chapter 47	3. or attorney	in good standing with the Florida B	ar prepared t	his form for your b	e or
she must complete the following		o, or altornoy .	good othering that the Florida D	ar properce t	riis roiiii ioi you, ri	ie 0i
I,	the and the instructions to	, prepared the	ne CE Form 6 in accordance with A	rt. II, Sec. 8,	Florida Constitutio	on,
and correct.	utes, and the instructions to	o ane torm. Upo	on my reasonable knowledge and b	eliet, the disc	ciosure nerein is tr	rue
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 DADTS A	THROUGH E ARE CO	NTINUED C	ON A SEPARATE SHEET, PLE	ASE CHEC	CK HERE	

	Form 6, Karl Nurse RECEIVED	
	Part B, Assets 2009 JUN-8 PM 12: 87	
I)	Bay Tech Label, 12177. 28th Setwist Peterslage 375711	- 1,500,006
2)	Bay Tech Label, 12177.28 Stephniss Reference 335711 Nelson Apts, 430-5425t.N, St Petersburg HE 335761	346,000
	Bay Tech Lobel Bldg. 12177-285St.N, St Fetersburg 33716	850,000
	401K W/Maso Notual Newberger Berman Station Egyly R3	949,000
	IRA. Green Century Fund	120,006
	Opperhenne/Invesco Rising Div/Equity Income Finds	153,685
	T.D. Americade - Bokshire Hatthakay, Ford, GE, GM, ATT	275,670
	Mary's, Torget, Whirlpool, First Solar, Green Century Find,	· ·
	CVS, Delta, Dick's Sporting Goods, MYTimes, Vestes Wind, Bo	XINQ
	Bristol-Myers, Canadian Solar, JC Renney, Jell Wen, Webter	
8)	Home . 176. 21st Ave SE, St Petersburg 33705	2,97,000
	2rd Home - 1352 S. Lake Sunmit PL, Zirconic, NC.	500,000
	Doughto home - 18457 Klimm Ave, Honewood, IL.	125,000
	Vacant lots 201.222 Aves.	7675
	655.27th Aves	7633
	1200-12th Hues	6333
	1900 Block Mulrose Aves	15000
12	1330 - 215 St. S. St Petersbug Ft. 33712	27,501
(3)	1144 - 332 St.S. "	44,072
		5,244,569
14)	Household Goods	37,506
15)	Books	28,000
16)	Lash · Checking / Savings Accts	182,000
	Total	5,674,090
17)	Car-Cherry Volt	t 15000
W.		

	Form 6, Karl Nurse
	Part D, Forone
1)	Bay Tech Label, Pay 12177. 28th St. N, St. Petersburg Fl 33716 137, 800.
ン)	Robol I acome. Nelson Apts, 430-5th St. N. St. Petersbug A. 33201 90,000
37	Divided + T.D. Ameritrade, 200 South 108th Ave, Ornaha, NE 68154 3000.
4)	" Investo/Oppenheure P.D. Box 219078, Kansas (ity, MO 64121 2000)
	2-32,600
PROJECT COME SERVICE AND	
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