FORM 6 FULL AND PUBLIC DISCLOSUR	LE DECEMBE 2021
Please print or type your name, mailing address, agency name, and position below:	FOR OFFICE USE ONLY:
LAST NAME — FIRST NAME — MIDDLE NAME: Eggers J. David	2022 JUN 13 PM 12: 10
MAILING ADDRESS: 1001 Glynwood Place	LECTION SERVICE CENTER
1001 Glyllwood Flace	
CITY: ZIP: COUNTY:	
Dunedin 34698 Pinellas	
NAME OF AGENCY: Pinellas County - Elected Constitutional Officer	
NAME OF OFFICE OR POSITION HELD OR SOUGHT: Commissioner - District 4 Pinelles Board of County Commissioners	
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, 2021 or a more current of	ate. [Note: Net worth is not cal-
culated by subtracting your reported liabilities from your reported assets, so please se	
My net worth as of December 31 20 21 was \$ 745,396.	*
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 following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic ite furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased. 121,310.00	ms; art objects; household equipment and
The aggregate value of my household goods and personal effects (described above) is \$	
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000: DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See Attached	\$806,024.21
PART C LIABILITIES	
LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4): NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Achieva Credit Union - Home Mortgage - PO Box 1500, Dunedin, Fl 34697	\$135,235
Achieva Credit Union - Home Equity Loan - PO Box 1500, Dunedin, Fl 34697	\$ 31,759
Achieva Credit Union - Car Loan - PO Box 1500, Dunedin, Fl. 34697	\$ 14,944
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:	
NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
NA NA	AMOUNT OF LIABILITY

		PART D	INCOME	~ pm 1157	home to	
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 2021 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before						
			LULL JUN	13 PM	[2: [0]	
I elect to file a copy of my 2021 federal income tax return and all W2's, schedules, and attachments. [If you check this box and attach a copy of your 2020 tax return, you need not complete the remainder of Part D.] SCHOOLE (See instructions on page 5): ELECTION SERVICE CENTER						
PRIMARY SOURCES OF INCO		ge 5): ı	ADDRESS OF SOURCE OF INCOME	QLITTIGE.	AMOUNT	
NAME OF SOURCE OF INCO	DIME EXCEEDING \$1 000	PO Box	2438, Clearwater, Fl 33757		\$ 100,794	
			x 2553, Dunedin, Fl. 34697		\$ 10,000	
SECONDARY SOURCES OF IN	ICOME [Major customers, cli	ents. etc of	businesses owned by reporting personse	e instructio	ns on page 5]:	
NAME OF BUSINESS ENTITY	NAME OF MAJOR OF BUSINESS	SOURCES		1	PRINCIPAL BUSINESS ACTIVITY OF SOURCE	
Centerpointe Realty	Taoist Tai Chi So	ciety of	280 Locklie Street	Religi	ous Not For Profit	
	the USA, Inc.		Dunedin, Fl. 34698	Educa	tional Institution	
P			ED BUSINESSES [Instructions on p			
NAME OF	BUSINESS ENTITY:	# 1	BUSINESS ENTITY # 2	BUSIN	NESS ENTITY # 3	
NAME OF BUSINESS ENTITY	Centerpointe Realty					
ADDRESS OF BUSINESS ENTITY	PO Box 2553, Dune	din, FL	34697			
PRINCIPAL BUSINESS ACTIVITY	Commercial Real Es					
POSITION HELD WITH ENTITY	President					
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes					
NATURE OF MY OWNERSHIP INTEREST	100%					
		PART F	- TRAINING			
This section applies only to	officers required to comple	ete annual e	ethics training pursuant to section 112	3142, F.S.	[See instructions p. 6]	
<u> </u>	CERTIFY THAT I H	AVE CO	MPLETED THE REQUIRED T	RAINING	3.	
O.A	TH		TE OF FLORIDA			
			rn to (or affirmed) and subscribed before r	ne by mear	ns of	
I, the person whose name appoint beginning of this form, do depo			hysical presence or 🔲 online notarizatio		9 day of Dave E	
and say that the information dis			June , 20 2) by 1	PU	WENDY GRIMES	
and any attachments hereto is		11.7		FR6-73	ry Public - State of Florida ommission # GG 279988	
and complete. (Signatule of Notary Public-State of Flo. da) Bonded through National Notary Assn.						
(Print, Type, or Stamp Commissioned Name of Notary Public)						
Personally Known OR Produced Identification						
SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE 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: 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.						
Ciam -t-	2		-8	Date		
Signature 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						
IF ANY OF PARIS A	INCOUGH E ARE CO	MATHAME	A ALL MARIAMATER SHEET, I DE	/		

Form 6 - 2021 Eggers, J. David

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PART B - ASSETS

2022 JUN 13 PM 12: 10

Home (1001 Glynwood Place, Dunedin Florida 34698	3) \$	506,900.00
USB Annuity	\$	62,800.91
City of Dunedin Retirement:		
100% Great West Guaranteed Government Fun	ıd \$	13,651.56
FRS Investment Plan:		
FRS U.S. Stock Market Index Fund	\$	59,289.32
FRS U.S. Stoce Fund (340)	\$	85,692.49
Achieva Credit Union - Checking Account	\$	9,555.52
Achieva Credit Union - Savings Account	\$	24,794.41
2020 Chevy Traverse	\$	43,340.00
Total	\$	806,024.21

SUPERVISUR DE LE LOTIONE ELECTION SERVICE CENTER