FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 2019

FOR OFFICE USE ONLY:

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JUN 02 2020
FLAGLER COUNTY
SUPERVISOR OF ELECTIONS

PROCESSED

Flagler County-Elected Constitutional Officer

********AUTO**ALL FOR AADC 328 T4 P1 1 621

DAVID CHARLES SULLIVAN, COUNTY COMMISSIONER, DISTRICT 3
1769 E MOODY BLVD
BUNNELL FL 32110-6355

ID CODE
ID NO. 265669
CONF. CODE
Sullivan, David Charles

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 JUNE 1, 20 20 was $ 1,052,856.00

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 $ 95,000.00

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
PRIVATE RESIDENCE 99 FRONT ST. PALM COAST, FL 32137	#819,486
NAVY FEDERAL CREDIT UNION (NFCU) CHECKING, SAVINGS, CD ACCOUNTS	322,483
FIDELITY INVESTMENTS IRA	17,194
TD AMERITRADE INSTITUTIONAL IRA	17,763

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
NFCU HOME MORTAGE 99 FRONT ST PALM COAST, FL 32137	323,000
GENESIS G-80 FINANCE AUTO LEASE 2019	12,142

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

(Continued on reverse side)

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
FLAGLER COUNTY BOARD of COUNTY COMMISSIONERS	1796 E MOODY BLVD, BUNNELL, FL 32110	$55,390
SOCIAL SECURITY ADMINISTRATION	1200 REV. AB WOODS JR. BLVD BIRMINGHAM, AL 35283	23,736

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

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.

David C Sullivan

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Flagler

Sworn to (or affirmed) and subscribed before me by means of ☑ physical presence or ☐ online notarization, this 2nd day of June, 2020 by David C Sullivan

(Signature of Notary Public - State of Florida)

Luci M. Dance

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ✓ *OR* Produced Identification ____

Type of Identification Produced ____

LUCI M. DANCE Notary Public State of Florida Comm. Expires Jun 17, 2021 Commission # GG 075562 Bonded through National Notary Assn.

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form on your behalf, 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 ☑

David C Sullivan

Form 6 – Part B Assets (continuation)

Bank of America Checking Trust #0942	**$1,045**
Leased Genesis 2019 G-80 auto asset value	**$17,504**
2017 Chevrolet 2017 Colorado Z71 pick-up	**$24,856**
Grand Haven Golf Club Membership Value	**$7,300**
Time Share Ownership Galleon Key West #F43	**$10,000**
Time Share Ownership Hyatt Vacation Club	
Unit 518l Bonita Springs Florida 33080	**$25,000**
USAA Subscriber Savings Acct.	**$5,367**
David C Sullivan Campaign Loan	**$25,000**

Form 6 – Part D Income (continuation)

U S Navy Retirement Income, Defense Finance RET

Pay 8899 E. 56th Street Indianapolis, Indiana 46249 $81,036

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