FORM 6 FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS 2019

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

SUPERVISOR OF ELECTIONS

LAST NAME — FIRST NAME — MIDDLE NAME:
Smith, Jeffrey Raymond

2020 JUN -8 PM 3:08

MAILING ADDRESS:
1801 27th Street

FLORIDA
COMMISSION ON ETHICS
JUN 17 2020
RECEIVED
245650
PROCESSED

CITY :	ZIP :	COUNTY :
Vero Beach	32960	Indian River

NAME OF AGENCY :
Indian River County Clerk of Circuit Court and Comptroller

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Clerk of Circuit Court and Comptroller

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 December 31, 20 19 was $ 660,458.

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 $ 310,313

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See Attached	$562,693

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
See Attached	$203,813

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

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
Indian River County Clerk of Court Salary	P.O. Box 1028, Vero Beach, FL	$128,764
Morgan Stanley Inherited IRA	8500 Andrew Carnegie Blvd., Charlotte, NC	$30,000

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

N/A

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]

N/A

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY			
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.

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Indian River

Sworn to (or affirmed) and subscribed before me this 13th day of May, 20 20 by Jeffrey R. Smith

(Signature of Notary Public--State of Florida)

LAURA MCIVER
Commission # GG 217614
Expires May 15, 2022
Bonded Thru Troy Fain Insurance 800-385-7019

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

Personally Known X OR Produced Identification _____

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 ☒

PART B--ASSETS

Description of Asset		Value of Asset
Residential Home 325 28th Court SW Vero Beach, FL		$ 363,573
Cash - SunTrust Bank		16,772
Cash - SunTrust Bank CD		6,791
Cash - CenterState Bank		238
Cash - Capital One 360		-
FRS DROP Account Value		101,077
Morgan Stanley Inherited Traditional IRA		
Cash	$ 207	
Ishares Inc MSCI Japan ETF	$ 178	
Ishares Core MSCI EAFE ETF	$ 783	
Ishares Core MSCI Emerging	$ 376	
IShares Russell 1000 GRW ETF	$ 703	
IShares Russell 1000 Value ETF	$ 819	
Blackrock Low Dur BD Inv Inst	$ 1,336	
Causeway Emerging Mkts Inst	$ 746	
E V Income Fund of Boston I	$ 267	
Edgewood Growth Inst	$ 341	
Harding Loevner Intl Equity Inst	$ 1,109	
Hartford MidCap	$ 145	
Hartford Small Cap Growth	$ 148	
John Hancock Intl Growt I	$ 733	
JP Morgan Value Advantage	$ 683	
Loomis Growth Y	$ 317	
Metropolitan West Tot Return Bd	$ 851	
Neuberger Intrinsic Value Inst	$ 435	
OakMark Internationall	$ 1,059	
PIMCO Intl BD USD Hedged I2	$ 256	
PIMCO Short Term I2	$ 798	
T Rowe Price Emgering Mkts BD	$ 135	
Wells Fargo Special MdCap VL	$ 299	
Western Asset Core Plus BD I	$ 1,264	13,988
Deferred Comp - Nationwide		
Nationwide Fixed Account		60,254
TOTAL		$ 562,693

PART C -- LIABILITIES

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Note Payable - Bank of the West (RV Loan) PO Box 4024 Alameda, CA 94501	$ 181,328
Note Payable - Bank of America (Car Loan) PO Box 45224, Jacksonville, FL	-
Note Payable - BB&T (Boat Loan) Loan Svcs MC 100-50-02-57 PO Box 2306 Wilson, NC	-
Note Payable - Chase Bank (Car Loan)	22,485
TOTAL	$ 203,813