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:

PROCESSED
Rec. Baker Co. Elect. Off. JUN 11 2020
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JUN 11 2020 AM 9:02

LAST NAME — FIRST NAME — MIDDLE NAME:
McInarnay Tiffany Harvey

MAILING ADDRESS:
13755 Leon Dopson Rd.

CITY: Sanderson ZIP: 32087 COUNTY: Baker

NAME OF AGENCY:
School Board Member

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

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 April 20, 20 20 was $ 3,221,435.

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 $ 30,000

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Personal home residing in @ 13755 Leon Dopson Rd. Sanderson, FL	@ 252,295
Jeannuea Boat	@ 170,000
Superior Cleaners (property, building, and contents)	@ 450,000
Various bank accounts, retirement accounts, and rental properties	@ 2,230,862

PART C -- LIABILITIES

(* see attachment)

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
NONE	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

Part B: Assets

Rental Properties: Total: $564,726

Magnolia Drive- $99,444
Azalea Drive- $88,379
Mount Vernon Street- $131,870
Ohio Avenue- $93,750
Ben Rowe Circle- $80,297
Laverne Street- $76,197
John Street- $64,605

Bank Accounts: Total: $1,007,858

Ameris Bank (savings account) - $114,013
Ameris Bank (savings account) - $20,256
Ameris Bank (rental checking account) - $4,774
Ameris Bank (personal checking account) - $33,585
Ameris Bank (checking acct) - $2,042
First Federal Bank (cash management acct) - $15,222
First Federal Bank (personal acct) - $8,414
First Federal Bank (CD) - $105,660
First Federal Bank (CD) - $575,065
Fidelity Bank (business checking acct) - $26,802
Country Financial Credit Union (CD) - $ 102,025

Retirement Accounts: Total: $658,278

LPL Financial - $8,457
LPL Financial - $831
LPL Financial - $2,810
LPL Financial - $70,834
LPL Financial - $433,851
LPL Financial - $62,486
LSW - $57,044
LSW - $21,965

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
Rental Properties	Various addresses	$25,642
Superior Cleaners	709 S. 6th St Macclenny, FL 32063	$34,800
Baker County School District	392 S Blvd East Macclenny, FL 32063	27,836

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			
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.

Jeffrey M Shaw

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Baker

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 11th day of June, 2020 by Tiffany H. McInarnay

Nita D Crawford
(Signature of Notary Public--State of Florida)

NITA D. CRAWFORD
(Print, Type, or Stamp Commissioned Name of Notary Public)
MY COMMISSION # GG 032508
EXPIRES: January 21, 2021
Bonded Thru Notary Public Underwriters

Personally Known ✓ 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 ☐