CONFIDENTIAL

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:
236732

PROCESSED
COMMISSION ON ETHICS
JUN 30 2020

RECEIVED
FLORIDA
COMMISSION ON ETHICS
JUL 01 2020

RECEIVED

LAST NAME — FIRST NAME — MIDDLE NAME:
PIZZO JASON WILLIAM BARNET

MAILING ADDRESS:
5582 NE 4TH COURT

SUITE 7B

CITY: MIAMI ZIP: 33137 COUNTY: MIAMI-DADE

NAME OF AGENCY:
FLORIDA SENATE

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
ELECTED CONSTITUTIONAL OFFICER

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 $ 8,989,374.15.

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 $ SEE ATTACHED

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
SEE ATTACHED	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
SEE ATTACHED	

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
NONE	

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
SEE ATTACHED		

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
NONE			

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	NONE		
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 Miami-Dade

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 29 day of June, 2020 by Jason Pizzo.

(Signature of Notary Public--State of Florida)

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

LINDA KRAFT
Notary Public-State of Florida
Commission # GG 295331
My Commission Expires
January 27, 2023

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 ☐

PIZZO, JASON WILLIAM BARNET
Full and Public Disclosure of Financial Interests
December 31, 2019

PART B – ASSETS	**VALUE OF ASSET**
Household Goods & Personal Effects	
-Vehicles, Jewelry, Art, Clothing, Equip. & Furnishings	$720,868
Assets Individually Valued at Over $1,000	
-Partnerships in Real Estate Investments	
Town Center at Haddon Urban Renewal, LLC 225 Haddon Avenue Haddon Twp., NJ 08108	$2,310,000
Pond View at Westbrook, LLC 100 Westbrook Drive Woolwich Twp., NJ 08085	$2,079,000
Westbrook at Weatherby, LLC 100 Westbrook Drive Woolwich Twp., NJ 08085	$1,848,000
PizzoBrown, LLC 110 Juniper Lane Hammonton, NJ 08037	$330,750
-Guardian Whole Life Insurance	
#1 Policy Cash Value	$177,113
#2 Policy Cash Value	$29,992
#3 Policy Cash Value	$14,639
-TD Bank	
Checking Account	$1,507,088.86

PART C - LIABILITIES	**AMOUNT OF LIABILITY**
American Express P.O. Box 650448 Dallas, TX 75265	$27,208.71

PART D – INCOME	**AMOUNT**
State of Florida Chief Financial Officer 200 E. Gaines Street Tallahassee, FL 33399	$26,646.12
Berkshire Human Resources 1065 Rt. 22 West Bridgewater, NJ 08807	$156,000
Pond View at Westbrook, LLC 100 Westbrook Drive Woolwich Twp., NJ 08085	$39,000
Westbrook at Weatherby, LLC 100 Westbrook Drive Woolwich Twp., NJ 08085	$12,000
BHC&S 1 Borgata Way Atlantic City, NJ 08401	$250,000
Guardian Life Insurance Co. P.O. Box 26100 Lehigh Valley, PA 18002	$132,071.28