

General Information

Name: TIMMY S JONES

PID 70101

THE LAST DAY OF MY PUBLIC OFFICE OR POSITION WAS: 07/18/2025

AGENCY INFORMATION

Organization	Suborganization	Title
Board of Governors of the State University System	Employees	Senior Vice Chancellor Finance and Administration/CFO

Net WorthMy Net Worth as of July 18, 2025 was \$ 1,000,000.00.

Assets

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 effect is \$ 15,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
HOME	\$ 350,000.00
2ND HOME	\$ 280,000.00
MUTUAL FUNDS/DEFERRED COMP	\$ 700,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Please complete the following statement identifying each separate source and amount of income which exceeded \$1,000 received during the period from January 1, 2025, through the last date you held the office or position, including secondary sources of income.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
STATE OF FLORIDA	325 WEST GAINES ST. TALLAHASSEE, FL	\$ 10,000.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses**Business Entity # 1**

N/A

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6F and that the facts stated in it are true.

TIMMY S JONES

Digitally signed: 07/23/2025

Filed with COE: 07/23/2025