

General Information

Name: Mr Richard Allan Myhre

PID 251636

AGENCY INFORMATION

Organization	Suborganization	Title
Wakulla County School Board	Elected Constitutional Officer	Superintendent

Net WorthMy Net Worth as of June 1, 2026 was \$ 1,976,689.00.**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.

The aggregate value of my household goods and personal effect is \$ 35,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/01/2026

Description of Asset	Value of Asset
Personal Residence 85 Frank Jones Rd	\$ 460,440.00
Disney Vacation Club Timeshare	\$ 15,000.00
Addition Credit Union Checking	\$ 11,394.00
Addition Credit Union Savings	\$ 33,330.00
Charles Schwab Roth IRA	\$ 217,240.00
Charles Schwab Individual Brokerage Account	\$ 20,532.00
Charles Schwab 529	\$ 42,698.00
Raymond James Individual Brokerage Account	\$ 87,724.00
Ameris Savings Account 1	\$ 22,293.00
Ameris Savings Account 2	\$ 27,283.00
Ameris Savings Account 3	\$ 572,006.00
Ameris Checking	\$ 39,480.00
Ameris Money Market	\$ 89,722.00
Ameris CD 1	\$ 3,925.00
Ameris CD 2	\$ 12,855.00
Ameris CD 3	\$ 44,510.00
Ameris CD 4	\$ 22,090.00
Ameris CD 5	\$ 44,510.00
Ameris CD 6	\$ 44,510.00
Ameris CD 7	\$ 12,982.00
2010 Silverado	\$ 8,000.00
2024 Kubota Tractor and Trailer	\$ 50,000.00
Undeveloped Real Estate in North Carolina	\$ 66,000.00
Midflorida Credit Union Checking	\$ 3,900.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Addition Credit Union Used Truck Loan	PO Box 5198 Tallahassee FL 32314	\$ 4,727.00
Kubota Credit Corporation	P.O. Box 15299 Wilmington, DE 19850	\$ 38,508.00
Care Credit-Cancer Payments	P.O. Box 71715 Philadelphia, PA 19176	\$ 2,500.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

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 2025 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 2025 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Wakulla County Schools	69 Arran Rd. Crawfordville, FL 32327	\$ 169,000.00
Veterans Affairs - Disability	P.O. Box 4444 Janesville, WI 53547	\$ 53,136.00

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

Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ I certify that I have completed the required training under Section 112.3142, F.S.
- ☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Reporting Official or Candidate

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

Richard Allan Myhre

Digitally signed: 06/01/2026

Filed with COE: 06/01/2026