

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/12/2023

General Information

Name: Mr Michael Carl Rahn

Address: 6833 CORRAL CIR, SARASOTA, FL 34243

PID 266780

County: Manatee

AGENCY INFORMATION

Organization	Suborganization	Title
Manatee County	Elected Constitutional Officer	
Manatee County	Elected Constitutional Officer	County Commissioner, District 4
Public Service Commission Nominating Council	Council Members	Member

Net Worth

My Net Worth as of December 31, 2022 was \$ 339,961.00.

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 \$ 25,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Primary Residence	\$ 650,000.00
Saving Account	\$ 41,000.00
Checking Account	\$ 8,000.00
401k	\$ 42,000.00

Liabilities**LIABILITIES IN EXCESS OF \$1,000:**

Name of Creditor	Address of Creditor	Amount of Liability
NewRez	1100 Virginia Dr. #125. Fort Washington Pa 19034	\$ 362,000.00
Truist Bank	214 N Tryon St. Charlotte NC	\$ 42,000.00
GM Financial	PO Box 183581 Arlington TX	\$ 10,100.00

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.

☐ I elect to file a copy of my 2022 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
SouthState Bank	1101 First St S Winter Haven FL	\$ 200,000.00

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

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

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

N/A

Training

☒ 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.

Michael Carl Rahn

Digitally signed: 06/12/2023

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