

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/28/2023

General Information

Name: Mr Mark Shannon Earley

CONFIDENTIAL

Address: 2990 APALACHEE PKWY # 1, TALLAHASSEE, FL 32301

PID 264700

County: Leon

AGENCY INFORMATION

Organization	Suborganization	Title
Leon County	Elected Constitutional Officer	Supervisor of Elections

Net Worth

My Net Worth as of June 28, 2023 was \$ 442,277.74.

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 \$ 72,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
{REDACTED}	\$ 460,000.00
{REDACTED}	\$ 8,100.00
Vehicles: 2015 Impala, 2012 F150, 1993 F150, 2017 Elantra	\$ 31,732.00
Bank of America Accounts	\$ 43,698.00
401K Savings Plan - Merrill Lynch	\$ 150,489.00

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

Name of Creditor	Address of Creditor	Amount of Liability
Roundpoint Mortgage	PO Box 19409 Charlotte NC 28219	\$ 313,930.00
Flag Credit Union (car Loan)	3115 Conner Blvd, Tallahassee, FL 32311	\$ 3,000.00

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
Leon County BOCC	301 S Monroe St Tallahassee FL 32301	\$ 161,988.00

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.

Mark Shannon Earley

Digitally signed: 06/28/2023

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