

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 09/05/2023

General Information

Name: Mrs Narragansett Smith

Address: 396 Nw Oosterhoudt Ln, Lake City, FL 32055

PID 275397

County: Columbia

AGENCY INFORMATION

Organization	Suborganization	Title
Columbia County School Board	Elected Constitutional Officer	School Board Member

Net Worth

My Net Worth as of December 31, 2022 was \$ 570,192.00.

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 N/A.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home/Property	\$ 425,000.00
Investment Property	\$ 115,000.00
Investment Product	\$ 250,720.00
Mutual Funds	\$ 3,000.00
Bank Accounts (Millennium	\$ 40,000.00
Seacoast Accounts	\$ 2,500.00
Life Insurance	\$ 10,000.00

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

Name of Creditor	Address of Creditor	Amount of Liability
Seacoast National Bank	350 SW Main Blvd Lake City, FL 32055	\$ 276,028.00

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
Pension (FRS)	Florida Dept of Educationn	\$ 4,200.00
Columbia School Board	372 W Duval St Lake City, FL 32055	\$ 2,500.00
Social Security	Federal Government	\$ 2,700.00

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.

Narragansett Smith

Digitally signed: 09/05/2023

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